



ARIZONA HEALTH CARE
COST CONTAINMENT SYSTEM
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2007 Rate Codes - Radiology

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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
70010	MYELOGRAPHY, POSTERIOR FOSSA, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$216.04	\$216.04	10/1/2007
70015	CISTERNOGRAPHY, POSITIVE CONTRAST, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$125.29	\$125.29	10/1/2007
70030	RADIOLOGIC EXAMINATION, EYE, FOR DETECTION OF FOREIGN BODY	\$27.01	\$27.01	10/1/2007
70100	RADIOLOGIC EXAMINATION, MANDIBLE; PARTIAL, LESS THAN FOUR VIEWS	\$30.47	\$30.47	10/1/2007
70110	RADIOLOGIC EXAMINATION, MANDIBLE; COMPLETE, MINIMUM OF FOUR VIEWS	\$38.80	\$38.80	10/1/2007
70120	RADIOLOGIC EXAMINATION, MASTOIDS; LESS THAN THREE VIEWS PER SIDE	\$34.79	\$34.79	10/1/2007
70130	RADIOLOGIC EXAMINATION, MASTOIDS; COMPLETE, MINIMUM OF THREE VIEWS PER SIDE	\$51.72	\$51.72	10/1/2007
70134	RADIOLOGIC EXAMINATION, INTERNAL AUDITORY MEATI, COMPLETE	\$47.84	\$47.84	10/1/2007
70140	RADIOLOGIC EXAMINATION, FACIAL BONES; LESS THAN THREE VIEWS	\$33.59	\$33.59	10/1/2007
70150	RADIOLOGIC EXAMINATION, FACIAL BONES; COMPLETE, MINIMUM OF THREE VIEWS	\$44.62	\$44.62	4/1/2006
70160	RADIOLOGIC EXAMINATION, NASAL BONES, COMPLETE, MINIMUM OF THREE VIEWS	\$30.51	\$30.51	10/1/2007
70170	DACRYOCYSTOGRAPHY, NASOLACRIMAL DUCT, RADIOLOGICAL SUPERVISION AND	\$53.68	\$53.68	4/1/2006
70190	RADIOLOGIC EXAMINATION; OPTIC FORAMINA	\$36.23	\$36.23	10/1/2007
70200	RADIOLOGIC EXAMINATION; ORBITS, COMPLETE, MINIMUM OF FOUR VIEWS	\$45.71	\$45.71	10/1/2007
70210	RADIOLOGIC EXAMINATION, SINUSES, PARANASAL, LESS THAN THREE VIEWS	\$33.27	\$33.27	10/1/2007
70220	RADIOLOGIC EXAMINATION, SINUSES, PARANASAL, COMPLETE, MINIMUM OF THREE VIEWS	\$43.10	\$43.10	10/1/2007
70240	RADIOLOGIC EXAMINATION, SELLA TURCICA	\$27.72	\$27.72	10/1/2007
70250	RADIOLOGIC EXAMINATION, SKULL; LESS THAN FOUR VIEWS	\$37.68	\$37.68	10/1/2007
70260	RADIOLOGIC EXAMINATION, SKULL; COMPLETE, MINIMUM OF FOUR VIEWS	\$52.52	\$52.52	10/1/2007
70300	RADIOLOGIC EXAMINATION, TEETH; SINGLE VIEW	\$16.40	\$16.40	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
70310	RADIOLOGIC EXAMINATION, TEETH; PARTIAL EXAMINATION, LESS THAN FULL MOUTH	\$29.38	\$29.38	10/1/2007
70320	RADIOLOGIC EXAMINATION, TEETH; COMPLETE, FULL MOUTH	\$44.76	\$44.76	10/1/2007
70328	RADIOLOGIC EXAMINATION, TEMPOROMANDIBULAR JOINT, OPEN AND CLOSED MOUTH;	\$29.31	\$29.31	10/1/2007
70330	RADIOLOGIC EXAMINATION, TEMPOROMANDIBULAR JOINT, OPEN AND CLOSED MOUTH;	\$47.02	\$47.02	10/1/2007
70332	TEMPOROMANDIBULAR JOINT ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND	\$105.51	\$105.51	10/1/2007
70336	MAGNETIC RESONANCE (EG, PROTON) IMAGING, TEMPOROMANDIBULAR JOINT(S)	\$532.38	\$532.38	10/1/2007
70350	CEPHALOGRAM, ORTHODONTIC	\$23.52	\$23.52	10/1/2007
70355	ORTHOPANTOGRAM	\$30.83	\$30.83	10/1/2007
70360	RADIOLOGIC EXAMINATION; NECK, SOFT TISSUE	\$26.63	\$26.63	10/1/2007
70370	RADIOLOGIC EXAMINATION; PHARYNX OR LARYNX, INCLUDING FLUOROSCOPY AND/OR	\$71.24	\$71.24	10/1/2007
70371	COMPLEX DYNAMIC PHARYNGEAL AND SPEECH EVALUATION BY CINE OR VIDEO RECORDING	\$119.21	\$119.21	10/1/2007
70373	LARYNGOGRAPHY, CONTRAST, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$91.88	\$91.88	10/1/2007
70380	RADIOLOGIC EXAMINATION, SALIVARY GLAND FOR CALCULUS	\$37.16	\$37.16	10/1/2007
70390	SIALOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$95.60	\$95.60	10/1/2007
70450	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL	\$232.48	\$232.48	10/1/2007
70460	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITH CONTRAST MATERIAL(S)	\$289.45	\$289.45	10/1/2007
70470	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY	\$353.20	\$353.20	10/1/2007
70480	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR	\$285.31	\$285.31	10/1/2007
70481	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR	\$333.22	\$333.22	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
70482	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR	\$393.31	\$393.31	10/1/2007
70486	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL	\$262.89	\$262.89	10/1/2007
70487	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITH CONTRAST MATERIAL(S)	\$314.87	\$314.87	10/1/2007
70488	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL, FOLLOWED BY	\$382.55	\$382.55	10/1/2007
70490	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL	\$267.06	\$267.06	10/1/2007
70491	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITH CONTRAST MATERIAL(S)	\$314.96	\$314.96	10/1/2007
70492	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL FOLLOWED BY	\$380.89	\$380.89	10/1/2007
70496	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, HEAD, WITHOUT CONTRAST MATERIAL(S), FOLLOWED	\$571.38	\$571.38	10/1/2007
70498	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, NECK, WITHOUT CONTRAST MATERIAL(S), FOLLOWED	\$572.16	\$572.16	10/1/2007
70540	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND/OR NECK; WITHOUT CONTR	\$536.26	\$536.26	10/1/2007
70542	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND NECK; WITH CONTRAST	\$626.35	\$626.35	10/1/2007
70543	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ORBIT, FACE, AND NECK; WITHOUT	\$1,032.71	\$1,032.71	10/1/2007
70544	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S)	\$552.40	\$552.40	10/1/2007
70545	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITH CONTRAST MATERIAL(S)	\$551.62	\$551.62	10/1/2007
70546	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY	\$982.90	\$982.90	10/1/2007
70547	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S)	\$552.01	\$552.01	10/1/2007
70548	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITH CONTRAST MATERIAL(S)	\$559.78	\$559.78	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
70549	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY	\$982.51	\$982.51	10/1/2007
70551	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITHOUT	\$552.96	\$552.96	10/1/2007
70552	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITH	\$646.89	\$646.89	10/1/2007
70553	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITHOUT	\$1,054.75	\$1,054.75	10/1/2007
70554	MAGNETIC RESONANCE IMAGING, BRAIN, FUNCTIONAL MRI; INCLUDING TEST SELECTION AND	\$635.89	\$635.89	10/1/2007
70555	MAGNETIC RESONANCE IMAGING, BRAIN, FUNCTIONAL MRI; REQUIRING PHYSICIAN OR PSYCHO	BR	BR	1/1/2007
70557	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	BR	BR	1/1/2004
70558	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	BR	BR	1/1/2004
70559	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	BR	BR	1/1/2004
71010	RADIOLOGIC EXAMINATION, CHEST; SINGLE VIEW, FRONTAL	\$26.98	\$26.98	10/1/2007
71015	RADIOLOGIC EXAMINATION, CHEST; STEREO, FRONTAL	\$31.14	\$31.14	10/1/2007
71020	RADIOLOGIC EXAMINATION, CHEST, TWO VIEWS, FRONTAL AND LATERAL;	\$35.42	\$35.42	10/1/2007
71021	RADIOLOGIC EXAMINATION, CHEST, TWO VIEWS, FRONTAL AND LATERAL; WITH APICAL	\$42.64	\$42.64	10/1/2007
71022	RADIOLOGIC EXAMINATION, CHEST, TWO VIEWS, FRONTAL AND LATERAL; WITH OBLIQUE	\$45.98	\$45.98	10/1/2007
71023	RADIOLOGIC EXAMINATION, CHEST, TWO VIEWS, FRONTAL AND LATERAL; WITH FLUOROSCOPY	\$56.99	\$56.99	10/1/2007
71030	RADIOLOGIC EXAMINATION, CHEST, COMPLETE, MINIMUM OF FOUR VIEWS;	\$47.54	\$47.54	10/1/2007
71034	RADIOLOGIC EXAMINATION, CHEST, COMPLETE, MINIMUM OF FOUR VIEWS; WITH FLUOROSCOPY	\$85.91	\$85.91	10/1/2007



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71035	RADIOLOGIC EXAMINATION, CHEST, SPECIAL VIEWS (EG, LATERAL DECUBITUS, BUCKY	\$31.64	\$31.64	10/1/2007
71040	BRONCHOGRAPHY, UNILATERAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$92.48	\$92.48	10/1/2007
71060	BRONCHOGRAPHY, BILATERAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$132.01	\$132.01	10/1/2007
71090	INSERTION PACEMAKER, FLUOROSCOPY AND RADIOGRAPHY, RADIOLOGICAL SUPERVISION AND	\$96.78	\$96.78	4/1/2006
71100	RADIOLOGIC EXAMINATION, RIBS, UNILATERAL; TWO VIEWS	\$34.25	\$34.25	10/1/2007
71101	RADIOLOGIC EXAMINATION, RIBS, UNILATERAL; INCLUDING POSTEROANTERIOR CHEST,	\$40.67	\$40.67	10/1/2007
71110	RADIOLOGIC EXAMINATION, RIBS, BILATERAL; THREE VIEWS	\$44.58	\$44.58	10/1/2007
71111	RADIOLOGIC EXAMINATION, RIBS, BILATERAL; INCLUDING POSTEROANTERIOR CHEST,	\$52.96	\$52.96	10/1/2007
71120	RADIOLOGIC EXAMINATION; STERNUM, MINIMUM OF TWO VIEWS	\$35.88	\$35.88	10/1/2007
71130	RADIOLOGIC EXAMINATION; STERNOCLAVICULAR JOINT OR JOINTS, MINIMUM OF THREE VIEWS	\$39.69	\$39.69	4/1/2006
71250	COMPUTED TOMOGRAPHY, THORAX; WITHOUT CONTRAST MATERIAL	\$297.91	\$297.91	10/1/2007
71260	COMPUTED TOMOGRAPHY, THORAX; WITH CONTRAST MATERIAL(S)	\$352.12	\$352.12	10/1/2007
71270	COMPUTED TOMOGRAPHY, THORAX; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST	\$433.39	\$433.39	10/1/2007
71275	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, CHEST (NONCORONARY), WITHOUT CONTRAST MATERIAL	\$573.84	\$573.84	10/1/2007
71550	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	\$563.57	\$563.57	10/1/2007
71551	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	\$658.70	\$658.70	10/1/2007
71552	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	\$1,065.34	\$1,065.34	10/1/2007



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71555	MAGNETIC RESONANCE ANGIOGRAPHY, CHEST (EXCLUDING MYOCARDIUM), WITH OR WITHOUT	\$577.40	\$577.40	10/1/2007
72010	RADIOLOGIC EXAMINATION, SPINE, ENTIRE, SURVEY STUDY, ANTEROPOSTERIOR AND LATERAL	\$66.87	\$66.87	10/1/2007
72020	RADIOLOGIC EXAMINATION, SPINE, SINGLE VIEW, SPECIFY LEVEL	\$24.37	\$24.37	10/1/2007
72040	RADIOLOGIC EXAMINATION, SPINE, CERVICAL; TWO OR THREE VIEWS	\$36.58	\$36.58	10/1/2007
72050	RADIOLOGIC EXAMINATION, SPINE, CERVICAL; MINIMUM OF FOUR VIEWS	\$52.61	\$52.61	10/1/2007
72052	RADIOLOGIC EXAMINATION, SPINE, CERVICAL; COMPLETE, INCLUDING OBLIQUE AND	\$65.26	\$65.26	10/1/2007
72069	RADIOLOGIC EXAMINATION, SPINE, THORACOLUMBAR, STANDING (SCOLIOSIS)	\$32.66	\$32.66	10/1/2007
72070	RADIOLOGIC EXAMINATION, SPINE; THORACIC, TWO VIEWS	\$36.58	\$36.58	10/1/2007
72072	RADIOLOGIC EXAMINATION, SPINE; THORACIC, THREE VIEWS	\$40.49	\$40.49	10/1/2007
72074	RADIOLOGIC EXAMINATION, SPINE; THORACIC, MINIMUM OF FOUR VIEWS	\$47.89	\$47.89	10/1/2007
72080	RADIOLOGIC EXAMINATION, SPINE; THORACOLUMBAR, TWO VIEWS	\$37.75	\$37.75	10/1/2007
72090	RADIOLOGIC EXAMINATION, SPINE; SCOLIOSIS STUDY, INCLUDING SUPINE AND ERECT	\$43.35	\$43.35	10/1/2007
72100	RADIOLOGIC EXAMINATION, SPINE, LUMBOSACRAL; TWO OR THREE VIEWS	\$38.91	\$38.91	10/1/2007
72110	RADIOLOGIC EXAMINATION, SPINE, LUMBOSACRAL; MINIMUM OF FOUR VIEWS	\$53.77	\$53.77	10/1/2007
72114	RADIOLOGIC EXAMINATION, SPINE, LUMBOSACRAL; COMPLETE, INCLUDING BENDING VIEWS	\$68.76	\$68.76	10/1/2007
72120	RADIOLOGIC EXAMINATION, SPINE, LUMBOSACRAL, BENDING VIEWS ONLY, MINIMUM OF FOUR	\$48.67	\$48.67	10/1/2007
72125	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITHOUT CONTRAST MATERIAL	\$297.91	\$297.91	10/1/2007
72126	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITH CONTRAST MATERIAL	\$351.03	\$351.03	10/1/2007
72127	COMPUTED TOMOGRAPHY, CERVICAL SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY	\$427.20	\$427.20	10/1/2007



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72128	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITHOUT CONTRAST MATERIAL	\$297.91	\$297.91	10/1/2007
72129	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITH CONTRAST MATERIAL	\$351.03	\$351.03	10/1/2007
72130	COMPUTED TOMOGRAPHY, THORACIC SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY	\$426.81	\$426.81	10/1/2007
72131	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITHOUT CONTRAST MATERIAL	\$297.91	\$297.91	10/1/2007
72132	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITH CONTRAST MATERIAL	\$351.03	\$351.03	10/1/2007
72133	COMPUTED TOMOGRAPHY, LUMBAR SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY	\$428.75	\$428.75	10/1/2007
72141	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, CERVICAL;	\$540.09	\$540.09	10/1/2007
72142	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, CERVICAL;	\$653.77	\$653.77	10/1/2007
72146	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, THORACIC;	\$578.26	\$578.26	10/1/2007
72147	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, THORACIC;	\$634.35	\$634.35	10/1/2007
72148	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, LUMBAR;	\$572.88	\$572.88	10/1/2007
72149	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, LUMBAR;	\$647.28	\$647.28	10/1/2007
72156	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT	\$1,062.15	\$1,062.15	10/1/2007
72157	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT	\$1,046.61	\$1,046.61	10/1/2007
72158	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SPINAL CANAL AND CONTENTS, WITHOUT	\$1,051.64	\$1,051.64	10/1/2007
72159	MAGNETIC RESONANCE ANGIOGRAPHY, SPINAL CANAL AND CONTENTS, WITH OR WITHOUT	\$610.60	\$610.60	10/1/2007
72170	RADIOLOGIC EXAMINATION, PELVIS; ONE OR TWO VIEWS	\$28.96	\$28.96	10/1/2007



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72190	RADIOLOGIC EXAMINATION, PELVIS; COMPLETE, MINIMUM OF THREE VIEWS	\$38.95	\$38.95	10/1/2007
72191	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, PELVIS, WITHOUT CONTRAST MATERIAL(S),	\$554.81	\$554.81	10/1/2007
72192	COMPUTED TOMOGRAPHY, PELVIS; WITHOUT CONTRAST MATERIAL	\$290.79	\$290.79	10/1/2007
72193	COMPUTED TOMOGRAPHY, PELVIS; WITH CONTRAST MATERIAL(S)	\$337.25	\$337.25	10/1/2007
72194	COMPUTED TOMOGRAPHY, PELVIS; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST	\$414.47	\$414.47	10/1/2007
72195	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S)	\$545.70	\$545.70	10/1/2007
72196	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITH CONTRAST MATERIAL(S)	\$636.18	\$636.18	10/1/2007
72197	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS; WITHOUT CONTRAST MATERIAL(S),	\$1,042.19	\$1,042.19	10/1/2007
72198	MAGNETIC RESONANCE ANGIOGRAPHY, PELVIS, WITH OR WITHOUT CONTRAST MATERIAL(S)	\$572.77	\$572.77	10/1/2007
72200	RADIOLOGIC EXAMINATION, SACROILIAC JOINTS; LESS THAN THREE VIEWS	\$29.73	\$29.73	10/1/2007
72202	RADIOLOGIC EXAMINATION, SACROILIAC JOINTS; THREE OR MORE VIEWS	\$35.53	\$35.53	10/1/2007
72220	RADIOLOGIC EXAMINATION, SACRUM AND COCCYX, MINIMUM OF TWO VIEWS	\$31.72	\$31.72	10/1/2007
72240	MYELOGRAPHY, CERVICAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$213.62	\$213.62	10/1/2007
72255	MYELOGRAPHY, THORACIC, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$197.24	\$197.24	10/1/2007
72265	MYELOGRAPHY, LUMBOSACRAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$188.60	\$188.60	10/1/2007
72270	MYELOGRAPHY, TWO OR MORE REGIONS (EG, LUMBAR/THORACIC, CERVICAL/ THORACIC,	\$288.42	\$288.42	10/1/2007
72275	EPIDUROGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$120.90	\$120.90	10/1/2007
72285	DISKOGRAPHY, CERVICAL OR THORACIC, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$329.30	\$329.30	10/1/2007



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72291	RADIOLOGICAL SUPERVISION AND INTERPRETATION, PERCUTANEOUS VERTEBROPLASTY OR VERT	\$78.35	\$78.35	1/1/2007
72292	RADIOLOGICAL SUPERVISION AND INTERPRETATION, PERCUTANEOUS VERTEBROPLASTY OR VERT	\$92.64	\$92.64	1/1/2007
72295	DISKOGRAPHY, LUMBAR, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$298.19	\$298.19	10/1/2007
73000	RADIOLOGIC EXAMINATION; CLAVICLE, COMPLETE	\$28.60	\$28.60	10/1/2007
73010	RADIOLOGIC EXAMINATION; SCAPULA, COMPLETE	\$29.73	\$29.73	10/1/2007
73020	RADIOLOGIC EXAMINATION, SHOULDER; ONE VIEW	\$25.92	\$25.92	10/1/2007
73030	RADIOLOGIC EXAMINATION, SHOULDER; COMPLETE, MINIMUM OF TWO VIEWS	\$32.07	\$32.07	10/1/2007
73040	RADIOLOGIC EXAMINATION, SHOULDER, ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND	\$111.73	\$111.73	10/1/2007
73050	RADIOLOGIC EXAMINATION; ACROMIOCLAVICULAR JOINTS, BILATERAL, WITH OR WITHOUT	\$37.44	\$37.44	10/1/2007
73060	RADIOLOGIC EXAMINATION; HUMERUS, MINIMUM OF TWO VIEWS	\$31.72	\$31.72	10/1/2007
73070	RADIOLOGIC EXAMINATION, ELBOW; TWO VIEWS	\$28.25	\$28.25	10/1/2007
73080	RADIOLOGIC EXAMINATION, ELBOW; COMPLETE, MINIMUM OF THREE VIEWS	\$33.66	\$33.66	10/1/2007
73085	RADIOLOGIC EXAMINATION, ELBOW, ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND	\$108.23	\$108.23	10/1/2007
73090	RADIOLOGIC EXAMINATION; FOREARM, TWO VIEWS	\$28.60	\$28.60	10/1/2007
73092	RADIOLOGIC EXAMINATION; UPPER EXTREMITY, INFANT, MINIMUM OF TWO VIEWS	\$28.22	\$28.22	10/1/2007
73100	RADIOLOGIC EXAMINATION, WRIST; TWO VIEWS	\$28.22	\$28.22	10/1/2007
73110	RADIOLOGIC EXAMINATION, WRIST; COMPLETE, MINIMUM OF THREE VIEWS	\$31.68	\$31.68	10/1/2007
73115	RADIOLOGIC EXAMINATION, WRIST, ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND	\$97.31	\$97.31	10/1/2007
73120	RADIOLOGIC EXAMINATION, HAND; TWO VIEWS	\$27.83	\$27.83	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
73130	RADIOLOGIC EXAMINATION, HAND; MINIMUM OF THREE VIEWS	\$30.51	\$30.51	10/1/2007
73140	RADIOLOGIC EXAMINATION, FINGER(S), MINIMUM OF TWO VIEWS	\$25.61	\$25.61	10/1/2007
73200	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL	\$264.24	\$264.24	10/1/2007
73201	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITH CONTRAST MATERIAL(S)	\$311.11	\$311.11	10/1/2007
73202	COMPUTED TOMOGRAPHY, UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL, FOLLOWED BY	\$386.42	\$386.42	10/1/2007
73206	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, UPPER EXTREMITY, WITHOUT CONTRAST	\$518.69	\$518.69	10/1/2007
73218	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	\$541.31	\$541.31	10/1/2007
73219	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	\$628.68	\$628.68	10/1/2007
73220	MAGNETIC RESONANCE (EG, PROTON) IMAGING, UPPER EXTREMITY, OTHER THAN JOINT;	\$1,035.43	\$1,035.43	10/1/2007
73221	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT	\$531.22	\$531.22	10/1/2007
73222	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITH	\$618.58	\$618.58	10/1/2007
73223	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF UPPER EXTREMITY; WITHOUT	\$1,022.22	\$1,022.22	10/1/2007
73225	MAGNETIC RESONANCE ANGIOGRAPHY, UPPER EXTREMITY, WITH OR WITHOUT CONTRAST	\$569.97	\$569.97	10/1/2007
73500	RADIOLOGIC EXAMINATION, HIP; UNILATERAL, ONE VIEW	\$27.40	\$27.40	10/1/2007
73510	RADIOLOGIC EXAMINATION, HIP, UNILATERAL; COMPLETE, MINIMUM OF TWO VIEWS	\$35.46	\$35.46	10/1/2007
73520	RADIOLOGIC EXAMINATION, HIPS, BILATERAL, MINIMUM OF TWO VIEWS OF EACH HIP,	\$40.71	\$40.71	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
73525	RADIOLOGIC EXAMINATION, HIP, ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND	\$108.64	\$108.64	10/1/2007
73530	RADIOLOGIC EXAMINATION, HIP, DURING OPERATIVE PROCEDURE	\$35.51	\$35.51	4/1/2006
73540	RADIOLOGIC EXAMINATION, PELVIS AND HIPS, INFANT OR CHILD, MINIMUM OF TWO VIEWS	\$35.49	\$35.49	10/1/2007
73542	RADIOLOGICAL EXAMINATION, SACROILIAC JOINT ARTHROGRAPHY, RADIOLOGICAL	\$103.80	\$103.80	10/1/2007
73550	RADIOLOGIC EXAMINATION, FEMUR, TWO VIEWS	\$31.72	\$31.72	10/1/2007
73560	RADIOLOGIC EXAMINATION, KNEE; ONE OR TWO VIEWS	\$29.73	\$29.73	10/1/2007
73562	RADIOLOGIC EXAMINATION, KNEE; THREE VIEWS	\$33.63	\$33.63	10/1/2007
73564	RADIOLOGIC EXAMINATION, KNEE; COMPLETE, FOUR OR MORE VIEWS	\$38.14	\$38.14	10/1/2007
73565	RADIOLOGIC EXAMINATION, KNEE; BOTH KNEES, STANDING, ANTEROPOSTERIOR	\$29.34	\$29.34	10/1/2007
73580	RADIOLOGIC EXAMINATION, KNEE, ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND	\$129.66	\$129.66	10/1/2007
73590	RADIOLOGIC EXAMINATION; TIBIA AND FIBULA, TWO VIEWS	\$29.34	\$29.34	10/1/2007
73592	RADIOLOGIC EXAMINATION; LOWER EXTREMITY, INFANT, MINIMUM OF TWO VIEWS	\$28.22	\$28.22	10/1/2007
73600	RADIOLOGIC EXAMINATION, ANKLE; TWO VIEWS	\$27.83	\$27.83	10/1/2007
73610	RADIOLOGIC EXAMINATION, ANKLE; COMPLETE, MINIMUM OF THREE VIEWS	\$30.90	\$30.90	10/1/2007
73615	RADIOLOGIC EXAMINATION, ANKLE, ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND	\$109.42	\$109.42	10/1/2007
73620	RADIOLOGIC EXAMINATION, FOOT; TWO VIEWS	\$27.83	\$27.83	10/1/2007
73630	RADIOLOGIC EXAMINATION, FOOT; COMPLETE, MINIMUM OF THREE VIEWS	\$30.51	\$30.51	10/1/2007
73650	RADIOLOGIC EXAMINATION; CALCANEUS, MINIMUM OF TWO VIEWS	\$27.44	\$27.44	10/1/2007
73660	RADIOLOGIC EXAMINATION; TOE(S), MINIMUM OF TWO VIEWS	\$25.22	\$25.22	10/1/2007
73700	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL	\$264.24	\$264.24	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
73701	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITH CONTRAST MATERIAL(S)	\$311.89	\$311.89	10/1/2007
73702	COMPUTED TOMOGRAPHY, LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL, FOLLOWED BY	\$387.20	\$387.20	10/1/2007
73706	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, LOWER EXTREMITY, WITHOUT CONTRAST	\$537.00	\$537.00	10/1/2007
73718	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT;	\$537.43	\$537.43	10/1/2007
73719	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT; WITH	\$627.52	\$627.52	10/1/2007
73720	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER EXTREMITY OTHER THAN JOINT;	\$1,034.65	\$1,034.65	10/1/2007
73721	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT	\$533.93	\$533.93	10/1/2007
73722	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITH	\$620.91	\$620.91	10/1/2007
73723	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANY JOINT OF LOWER EXTREMITY; WITHOUT	\$1,021.83	\$1,021.83	10/1/2007
73725	MAGNETIC RESONANCE ANGIOGRAPHY, LOWER EXTREMITY, WITH OR WITHOUT CONTRAST	\$574.64	\$574.64	10/1/2007
74000	RADIOLOGIC EXAMINATION, ABDOMEN; SINGLE ANTEROPOSTERIOR VIEW	\$28.92	\$28.92	10/1/2007
74010	RADIOLOGIC EXAMINATION, ABDOMEN; ANTEROPOSTERIOR AND ADDITIONAL OBLIQUE AND	\$36.55	\$36.55	10/1/2007
74020	RADIOLOGIC EXAMINATION, ABDOMEN; COMPLETE, INCLUDING DECUBITUS AND/OR ERECT	\$39.51	\$39.51	10/1/2007
74022	RADIOLOGIC EXAMINATION, ABDOMEN; COMPLETE ACUTE ABDOMEN SERIES, INCLUDING	\$46.72	\$46.72	10/1/2007
74150	COMPUTED TOMOGRAPHY, ABDOMEN; WITHOUT CONTRAST MATERIAL	\$288.07	\$288.07	10/1/2007
74160	COMPUTED TOMOGRAPHY, ABDOMEN; WITH CONTRAST MATERIAL(S)	\$354.34	\$354.34	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
74170	COMPUTED TOMOGRAPHY, ABDOMEN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST	\$442.18	\$442.18	10/1/2007
74175	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN, WITHOUT CONTRAST MATERIAL(S),	\$567.29	\$567.29	10/1/2007
74181	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S)	\$527.06	\$527.06	10/1/2007
74182	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITH CONTRAST MATERIAL(S)	\$653.66	\$653.66	10/1/2007
74183	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ABDOMEN; WITHOUT CONTRAST MATERIAL(S),	\$1,042.58	\$1,042.58	10/1/2007
74185	MAGNETIC RESONANCE ANGIOGRAPHY, ABDOMEN, WITH OR WITHOUT CONTRAST MATERIAL(S)	\$573.16	\$573.16	10/1/2007
74190	PERITONEOGRAM (EG, AFTER INJECTION OF AIR OR CONTRAST), RADIOLOGICAL	\$77.10	\$77.10	4/1/2006
74210	RADIOLOGIC EXAMINATION; PHARYNX AND/OR CERVICAL ESOPHAGUS	\$70.31	\$70.31	10/1/2007
74220	RADIOLOGIC EXAMINATION; ESOPHAGUS	\$76.93	\$76.93	10/1/2007
74230	SWALLOWING FUNCTION, WITH CINERADIOGRAPHY/VIDEORADIOGRAPHY	\$83.30	\$83.30	10/1/2007
74235	REMOVAL OF FOREIGN BODY(S), ESOPHAGEAL, WITH USE OF BALLOON CATHETER,	\$164.76	\$164.76	4/1/2006
74240	RADIOLOGIC EXAMINATION, GASTROINTESTINAL TRACT, UPPER; WITH OR WITHOUT DELAYED	\$98.68	\$98.68	10/1/2007
74241	RADIOLOGIC EXAMINATION, GASTROINTESTINAL TRACT, UPPER; WITH OR WITHOUT DELAYED	\$102.17	\$102.17	10/1/2007
74245	RADIOLOGIC EXAMINATION, GASTROINTESTINAL TRACT, UPPER; WITH SMALL INTESTINE,	\$153.15	\$153.15	10/1/2007
74246	RADIOLOGICAL EXAMINATION, GASTROINTESTINAL TRACT, UPPER, AIR CONTRAST, WITH	\$109.60	\$109.60	10/1/2007
74247	RADIOLOGICAL EXAMINATION, GASTROINTESTINAL TRACT, UPPER, AIR CONTRAST, WITH	\$114.67	\$114.67	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
74249	RADIOLOGICAL EXAMINATION, GASTROINTESTINAL TRACT, UPPER, AIR CONTRAST, WITH	\$162.49	\$162.49	10/1/2007
74250	RADIOLOGIC EXAMINATION, SMALL INTESTINE, INCLUDES MULTIPLE SERIAL FILMS;	\$85.46	\$85.46	10/1/2007
74251	RADIOLOGIC EXAMINATION, SMALL INTESTINE, INCLUDES MULTIPLE SERIAL FILMS; VIA	\$165.07	\$165.07	10/1/2007
74260	DUODENOGRAPHY, HYPOTONIC	\$146.35	\$146.35	10/1/2007
74270	RADIOLOGIC EXAMINATION, COLON; BARIUM ENEMA, WITH OR WITHOUT KUB	\$118.94	\$118.94	10/1/2007
74280	RADIOLOGIC EXAMINATION, COLON; AIR CONTRAST WITH SPECIFIC HIGH DENSITY BARIUM,	\$161.01	\$161.01	10/1/2007
74283	THERAPEUTIC ENEMA, CONTRAST OR AIR, FOR REDUCTION OF INTUSSUSCEPTION OR OTHER	\$205.89	\$205.89	10/1/2007
74290	CHOLECYSTOGRAPHY, ORAL CONTRAST;	\$52.16	\$52.16	10/1/2007
74291	CHOLECYSTOGRAPHY, ORAL CONTRAST; ADDITIONAL OR REPEAT EXAMINATION OR MULTIPLE	\$37.78	\$37.78	10/1/2007
74300	CHOLANGIOGRAPHY AND/OR PANCREATOGRAPHY; INTRAOPERATIVE, RADIOLOGICAL	\$18.61	\$18.61	4/1/2006
74301	CHOLANGIOGRAPHY AND/OR PANCREATOGRAPHY; ADDITIONAL SET INTRAOPERATIVE,	\$11.31	\$11.31	4/1/2006
74305	CHOLANGIOGRAPHY AND/OR PANCREATOGRAPHY; THROUGH EXISTING CATHETER, RADIOLOGICAL	\$53.34	\$53.34	4/1/2006
74320	CHOLANGIOGRAPHY, PERCUTANEOUS, TRANSHEPATIC, RADIOLOGICAL SUPERVISION AND	\$143.30	\$143.30	10/1/2007
74327	POSTOPERATIVE BILIARY DUCT CALCULUS REMOVAL, PERCUTANEOUS VIA T-TUBE TRACT,	\$115.41	\$115.41	10/1/2007
74328	ENDOSCOPIC CATHETERIZATION OF THE BILIARY DUCTAL SYSTEM, RADIOLOGICAL	\$162.08	\$162.08	4/1/2006
74329	ENDOSCOPIC CATHETERIZATION OF THE PANCREATIC DUCTAL SYSTEM, RADIOLOGICAL	\$161.11	\$161.11	4/1/2006
74330	COMBINED ENDOSCOPIC CATHETERIZATION OF THE BILIARY AND PANCREATIC DUCTAL	\$172.32	\$172.32	4/1/2006



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
74340	INTRODUCTION OF LONG GASTROINTESTINAL TUBE (EG, MILLER-ABBOTT), INCLUDING	\$132.59	\$132.59	4/1/2006
74350	PERCUTANEOUS PLACEMENT OF GASTROSTOMY TUBE, RADIOLOGICAL SUPERVISION AND	\$154.16	\$154.16	10/1/2007
74355	PERCUTANEOUS PLACEMENT OF ENTEROCLYSIS TUBE, RADIOLOGICAL SUPERVISION AND	\$143.96	\$143.96	4/1/2006
74360	INTRALUMINAL DILATION OF STRICTURES AND/OR OBSTRUCTIONS (EG, ESOPHAGUS),	\$154.10	\$154.10	4/1/2006
74363	PERCUTANEOUS TRANSHEPATIC DILATION OF BILIARY DUCT STRICTURE WITH OR WITHOUT	\$287.43	\$287.43	4/1/2006
74400	UROGRAPHY (PYELOGRAPHY), INTRAVENOUS, WITH OR WITHOUT KUB, WITH OR WITHOUT TOMOG	\$100.24	\$100.24	10/1/2007
74410	UROGRAPHY, INFUSION, DRIP TECHNIQUE AND/OR BOLUS TECHNIQUE;	\$109.17	\$109.17	10/1/2007
74415	UROGRAPHY, INFUSION, DRIP TECHNIQUE AND/OR BOLUS TECHNIQUE; WITH	\$119.68	\$119.68	10/1/2007
74420	UROGRAPHY, RETROGRADE, WITH OR WITHOUT KUB	\$123.51	\$123.51	4/1/2006
74425	UROGRAPHY, ANTEGRADE, (PYELOSTOGRAM, NEPHROSTOGRAM, LOOPOGRAM), RADIOLOGICAL	\$71.05	\$71.05	4/1/2006
74430	CYSTOGRAPHY, MINIMUM OF THREE VIEWS, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$66.19	\$66.19	10/1/2007
74440	VASOGRAPHY, VESICULOGRAPHY, OR EPIDIDYMOGRAPHY, RADIOLOGICAL SUPERVISION AND	\$74.12	\$74.12	10/1/2007
74445	CORPORA CAVERNOSOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$104.86	\$104.86	4/1/2006
74450	URETHROCYSTOGRAPHY, RETROGRADE, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$75.58	\$75.58	4/1/2006
74455	URETHROCYSTOGRAPHY, VOIDING, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$86.05	\$86.05	10/1/2007
74470	RADIOLOGIC EXAMINATION, RENAL CYST STUDY, TRANSLUMBAR, CONTRAST VISUALIZATION,	\$77.87	\$77.87	4/1/2006



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
74475	INTRODUCTION OF INTRACATHETER OR CATHETER INTO RENAL PELVIS FOR DRAINAGE AND/OR	\$172.15	\$172.15	10/1/2007
74480	INTRODUCTION OF URETERAL CATHETER OR STENT INTO URETER THROUGH RENAL PELVIS FOR	\$172.15	\$172.15	10/1/2007
74485	DILATION OF NEPHROSTOMY, URETERS, OR URETHRA, RADIOLOGICAL SUPERVISION AND	\$144.88	\$144.88	10/1/2007
74710	PELVIMETRY, WITH OR WITHOUT PLACENTAL LOCALIZATION	\$55.24	\$55.24	10/1/2007
74740	HYSTEOSALPINGOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$75.31	\$75.31	10/1/2007
74775	PERINEOGRAM (EG, VAGINOGRAM, FOR SEX DETERMINATION OR EXTENT OF ANOMALIES)	\$90.74	\$90.74	4/1/2006
75552	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY; WITHOUT CONTRAST MATERIAL	\$603.01	\$603.01	10/1/2007
75553	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY; WITH CONTRAST MATERIAL	\$672.21	\$672.21	10/1/2007
75554	CARDIAC MAGNETIC RESONANCE IMAGING FOR FUNCTION, WITH OR WITHOUT MORPHOLOGY;	\$693.42	\$693.42	10/1/2007
75555	CARDIAC MAGNETIC RESONANCE IMAGING FOR FUNCTION, WITH OR WITHOUT MORPHOLOGY;	\$695.70	\$695.70	10/1/2007
75600	AORTOGRAPHY, THORACIC, WITHOUT SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AND INTER	\$479.74	\$479.74	10/1/2007
75605	AORTOGRAPHY, THORACIC, BY SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AND	\$481.68	\$481.68	10/1/2007
75625	AORTOGRAPHY, ABDOMINAL, BY SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AND	\$478.98	\$478.98	10/1/2007
75630	AORTOGRAPHY, ABDOMINAL PLUS BILATERAL ILIOFEMORAL LOWER EXTREMITY, CATHETER, BY	\$532.32	\$532.32	10/1/2007
75635	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMINAL AORTA AND BILATERAL ILIOFEMORAL	\$709.21	\$709.21	10/1/2007
75650	ANGIOGRAPHY, CERVICOCEREBRAL, CATHETER, INCLUDING VESSEL ORIGIN, RADIOLOGICAL	\$495.97	\$495.97	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
75658	ANGIOGRAPHY, BRACHIAL, RETROGRADE, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$492.75	\$492.75	10/1/2007
75660	ANGIOGRAPHY, EXTERNAL CAROTID, UNILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION	\$491.95	\$491.95	10/1/2007
75662	ANGIOGRAPHY, EXTERNAL CAROTID, BILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION	\$520.17	\$520.17	10/1/2007
75665	ANGIOGRAPHY, CAROTID, CEREBRAL, UNILATERAL, RADIOLOGICAL SUPERVISION AND	\$494.35	\$494.35	10/1/2007
75671	ANGIOGRAPHY, CAROTID, CEREBRAL, BILATERAL, RADIOLOGICAL SUPERVISION AND	\$518.25	\$518.25	10/1/2007
75676	ANGIOGRAPHY, CAROTID, CERVICAL, UNILATERAL, RADIOLOGICAL SUPERVISION AND	\$491.58	\$491.58	10/1/2007
75680	ANGIOGRAPHY, CAROTID, CERVICAL, BILATERAL, RADIOLOGICAL SUPERVISION AND	\$513.59	\$513.59	10/1/2007
75685	ANGIOGRAPHY, VERTEBRAL, CERVICAL, AND/OR INTRACRANIAL, RADIOLOGICAL SUPERVISION	\$490.78	\$490.78	10/1/2007
75705	ANGIOGRAPHY, SPINAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$533.94	\$533.94	10/1/2007
75710	ANGIOGRAPHY, EXTREMITY, UNILATERAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$486.00	\$486.00	10/1/2007
75716	ANGIOGRAPHY, EXTREMITY, BILATERAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$501.29	\$501.29	10/1/2007
75722	ANGIOGRAPHY, RENAL, UNILATERAL, SELECTIVE (INCLUDING FLUSH AORTOGRAM),	\$484.40	\$484.40	10/1/2007
75724	ANGIOGRAPHY, RENAL, BILATERAL, SELECTIVE (INCLUDING FLUSH AORTOGRAM),	\$514.18	\$514.18	10/1/2007
75726	ANGIOGRAPHY, VISCERAL, SELECTIVE OR SUPRASELECTIVE, (WITH OR WITHOUT FLUSH	\$480.90	\$480.90	10/1/2007
75731	ANGIOGRAPHY, ADRENAL, UNILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND	\$483.26	\$483.26	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
75733	ANGIOGRAPHY, ADRENAL, BILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND	\$504.77	\$504.77	10/1/2007
75736	ANGIOGRAPHY, PELVIC, SELECTIVE OR SUPRASELECTIVE, RADIOLOGICAL SUPERVISION AND	\$483.26	\$483.26	10/1/2007
75741	ANGIOGRAPHY, PULMONARY, UNILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND	\$483.79	\$483.79	10/1/2007
75743	ANGIOGRAPHY, PULMONARY, BILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND	\$502.72	\$502.72	10/1/2007
75746	ANGIOGRAPHY, PULMONARY, BY NONSELECTIVE CATHETER OR VENOUS INJECTION,	\$478.96	\$478.96	10/1/2007
75756	ANGIOGRAPHY, INTERNAL MAMMARY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$490.98	\$490.98	10/1/2007
75774	ANGIOGRAPHY, SELECTIVE, EACH ADDITIONAL VESSEL STUDIED AFTER BASIC EXAMINATION,	\$434.40	\$434.40	10/1/2007
75790	ANGIOGRAPHY, ARTERIOVENOUS SHUNT (EG, DIALYSIS PATIENT), RADIOLOGICAL	\$157.09	\$157.09	10/1/2007
75801	LYMPHANGIOGRAPHY, EXTREMITY ONLY, UNILATERAL, RADIOLOGICAL SUPERVISION AND INTER	\$259.97	\$259.97	4/1/2006
75803	LYMPHANGIOGRAPHY, EXTREMITY ONLY, BILATERAL, RADIOLOGICAL SUPERVISION AND	\$276.54	\$276.54	4/1/2006
75805	LYMPHANGIOGRAPHY, PELVIC/ABDOMINAL, UNILATERAL, RADIOLOGICAL SUPERVISION AND	\$286.32	\$286.32	4/1/2006
75807	LYMPHANGIOGRAPHY, PELVIC/ABDOMINAL, BILATERAL, RADIOLOGICAL SUPERVISION AND	\$302.18	\$302.18	4/1/2006
75809	SHUNTOGRAM FOR INVESTIGATION OF PREVIOUSLY PLACED INDWELLING NONVASCULAR SHUNT	\$66.78	\$66.78	10/1/2007
75810	SPLENOPORTOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$560.66	\$560.66	4/1/2006
75820	VENOGRAPHY, EXTREMITY, UNILATERAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$91.22	\$91.22	10/1/2007
75822	VENOGRAPHY, EXTREMITY, BILATERAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$124.93	\$124.93	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
75825	VENOGRAPHY, CAVAL, INFERIOR, WITH SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AND	\$474.35	\$474.35	10/1/2007
75827	VENOGRAPHY, CAVAL, SUPERIOR, WITH SERIALOGRAPHY, RADIOLOGICAL SUPERVISION AND	\$473.91	\$473.91	10/1/2007
75831	VENOGRAPHY, RENAL, UNILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND	\$475.10	\$475.10	10/1/2007
75833	VENOGRAPHY, RENAL, BILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND	\$498.34	\$498.34	10/1/2007
75840	VENOGRAPHY, ADRENAL, UNILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND	\$478.62	\$478.62	10/1/2007
75842	VENOGRAPHY, ADRENAL, BILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND	\$496.36	\$496.36	10/1/2007
75860	VENOGRAPHY, VENOUS SINUS (EG, PETROSAL AND INFERIOR SAGITTAL) OR JUGULAR,	\$479.72	\$479.72	10/1/2007
75870	VENOGRAPHY, SUPERIOR SAGITTAL SINUS, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$477.41	\$477.41	10/1/2007
75872	VENOGRAPHY, EPIDURAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$488.10	\$488.10	10/1/2007
75880	VENOGRAPHY, ORBITAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$90.83	\$90.83	10/1/2007
75885	PERCUTANEOUS TRANSHEPATIC PORTOGRAPHY WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL	\$489.14	\$489.14	10/1/2007
75887	PERCUTANEOUS TRANSHEPATIC PORTOGRAPHY WITHOUT HEMODYNAMIC EVALUATION,	\$491.47	\$491.47	10/1/2007
75889	HEPATIC VENOGRAPHY, WEDGED OR FREE, WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL	\$474.30	\$474.30	10/1/2007
75891	HEPATIC VENOGRAPHY, WEDGED OR FREE, WITHOUT HEMODYNAMIC EVALUATION,	\$474.30	\$474.30	10/1/2007
75893	VENOUS SAMPLING THROUGH CATHETER, WITH OR WITHOUT ANGIOGRAPHY (EG, FOR	\$445.38	\$445.38	10/1/2007



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75894	TRANSCATHETER THERAPY, EMBOLIZATION, ANY METHOD, RADIOLOGICAL SUPERVISION AND IN	\$1,030.29	\$1,030.29	4/1/2006
75896	TRANSCATHETER THERAPY, INFUSION, ANY METHOD (EG, THROMBOLYSIS OTHER THAN	\$904.51	\$904.51	4/1/2006
75898	ANGIOGRAPHY THROUGH EXISTING CATHETER FOR FOLLOW-UP STUDY FOR TRANSCATHETER	\$127.95	\$127.95	4/1/2006
75900	EXCHANGE OF A PREVIOUSLY PLACED INTRAVASCULAR CATHETER DURING THROMBOLYTIC THERAPY	\$854.18	\$854.18	4/1/2006
75901	MECHANICAL REMOVAL OF PERICATHETER OBSTRUCTIVE MATERIAL (EG, FIBRIN SHEATH)	\$133.33	\$133.33	10/1/2007
75902	MECHANICAL REMOVAL OF INTRALUMINAL (INTRACATHETER) OBSTRUCTIVE MATERIAL FROM	\$105.74	\$105.74	10/1/2007
75940	PERCUTANEOUS PLACEMENT OF IVC FILTER, RADIOLOGICAL SUPERVISION AND	\$530.38	\$530.38	4/1/2006
75945	INTRAVASCULAR ULTRASOUND (NON-CORONARY VESSEL), RADIOLOGICAL SUPERVISION AND	\$203.57	\$203.57	4/1/2006
75946	INTRAVASCULAR ULTRASOUND (NON-CORONARY VESSEL), RADIOLOGICAL SUPERVISION AND	\$113.36	\$113.36	4/1/2006
75952	ENDOVASCULAR REPAIR OF INFRARENAL ABDOMINAL AORTIC ANEURYSM OR DISSECTION,	\$241.70	\$241.70	4/1/2006
75953	PLACEMENT OF PROXIMAL OR DISTAL EXTENSION PROSTHESIS FOR ENDOVASCULAR REPAIR OF	\$101.93	\$101.93	4/1/2006
75954	ENDOVASCULAR REPAIR OF ILIAC ARTERY ANEURYSM, PSEUDOANEURYSM, ARTERIOVENOUS	BR	BR	1/1/2003
75956	ENDOVASCULAR REPAIR OF DESCENDING THORACIC AORTA (EG, ANEURYSM, PSEUDOANEURYSM,	BR	BR	1/1/2006
75957	ENDOVASCULAR REPAIR OF DESCENDING THORACIC AORTA (EG, ANEURYSM, PSEUDOANEURYSM,	BR	BR	1/1/2006
75958	PLACEMENT OF PROXIMAL EXTENSION PROSTHESIS FOR ENDOVASCULAR REPAIR OF DESCENDING	BR	BR	1/1/2006



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
75959	PLACEMENT OF DISTAL EXTENSION PROSTHESIS(S) (DELAYED) AFTER ENDOVASCULAR REPAIR	BR	BR	1/1/2006
75960	TRANSCATHETER INTRODUCTION OF INTRAVASCULAR STENT(S), (EXCEPT CORONARY,	\$636.48	\$636.48	4/1/2006
75961	TRANSCATHETER RETRIEVAL, PERCUTANEOUS, OF INTRAVASCULAR FOREIGN BODY (EG,	\$567.00	\$567.00	10/1/2007
75962	TRANSLUMINAL BALLOON ANGIOPLASTY, PERIPHERAL ARTERY, RADIOLOGICAL SUPERVISION	\$551.45	\$551.45	10/1/2007
75964	TRANSLUMINAL BALLOON ANGIOPLASTY, EACH ADDITIONAL PERIPHERAL ARTERY,	\$301.87	\$301.87	10/1/2007
75966	TRANSLUMINAL BALLOON ANGIOPLASTY, RENAL OR OTHER VISCERAL ARTERY, RADIOLOGICAL	\$594.50	\$594.50	10/1/2007
75968	TRANSLUMINAL BALLOON ANGIOPLASTY, EACH ADDITIONAL VISCERAL ARTERY, RADIOLOGICAL	\$302.62	\$302.62	10/1/2007
75970	TRANSCATHETER BIOPSY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$502.88	\$502.88	4/1/2006
75978	TRANSLUMINAL BALLOON ANGIOPLASTY, VENOUS (EG, SUBCLAVIAN STENOSIS),	\$547.93	\$547.93	10/1/2007
75980	PERCUTANEOUS TRANSHEPATIC BILIARY DRAINAGE WITH CONTRAST MONITORING,	\$290.56	\$290.56	4/1/2006
75982	PERCUTANEOUS PLACEMENT OF DRAINAGE CATHETER FOR COMBINED INTERNAL AND EXTERNAL	\$316.13	\$316.13	4/1/2006
75984	CHANGE OF PERCUTANEOUS TUBE OR DRAINAGE CATHETER WITH CONTRAST MONITORING (EG,	\$115.72	\$115.72	10/1/2007
75989	RADIOLOGICAL GUIDANCE (IE, FLUOROSCOPY, ULTRASOUND, OR COMPUTED TOMOGRAPHY),	\$174.37	\$174.37	10/1/2007
75992	TRANSLUMINAL ATHERECTOMY, PERIPHERAL ARTERY, RADIOLOGICAL SUPERVISION AND INTERP	\$656.06	\$656.06	4/1/2006
75993	TRANSLUMINAL ATHERECTOMY, EACH ADDITIONAL PERIPHERAL ARTERY, RADIOLOGICAL	\$350.28	\$350.28	4/1/2006



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
75994	TRANSLUMINAL ATHERECTOMY, RENAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$692.13	\$692.13	4/1/2006
75995	TRANSLUMINAL ATHERECTOMY, VISCERAL, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$691.30	\$691.30	4/1/2006
75996	TRANSLUMINAL ATHERECTOMY, EACH ADDITIONAL VISCERAL ARTERY, RADIOLOGICAL	\$349.72	\$349.72	4/1/2006
76000	FLUOROSCOPY (SEPARATE PROCEDURE), UP TO ONE HOUR PHYSICIAN TIME, OTHER THAN	\$74.51	\$74.51	10/1/2007
76001	FLUOROSCOPY, PHYSICIAN TIME MORE THAN ONE HOUR, ASSISTING A NON-RADIOLOGIC	\$140.23	\$140.23	4/1/2006
76010	RADIOLOGIC EXAMINATION FROM NOSE TO RECTUM FOR FOREIGN BODY, SINGLE VIEW, CHILD	\$29.70	\$29.70	10/1/2007
76080	RADIOLOGIC EXAMINATION, ABSCESS, FISTULA OR SINUS TRACT STUDY, RADIOLOGICAL	\$68.09	\$68.09	10/1/2007
76098	RADIOLOGICAL EXAMINATION, SURGICAL SPECIMEN	\$23.56	\$23.56	10/1/2007
76100	RADIOLOGIC EXAMINATION, SINGLE PLANE BODY SECTION (EG, TOMOGRAPHY), OTHER THAN	\$99.45	\$99.45	10/1/2007
76101	RADIOLOGIC EXAMINATION, COMPLEX MOTION (IE, HYPERCYCLOIDAL) BODY SECTION (EG,	\$122.00	\$122.00	10/1/2007
76102	RADIOLOGIC EXAMINATION, COMPLEX MOTION (IE, HYPERCYCLOIDAL) BODY SECTION (EG,	\$156.24	\$156.24	10/1/2007
76120	CINERADIOGRAPHY/VIDEORADIOGRAPHY, EXCEPT WHERE SPECIFICALLY INCLUDED	\$68.68	\$68.68	10/1/2007
76125	CINERADIOGRAPHY/VIDEORADIOGRAPHY TO COMPLEMENT ROUTINE EXAMINATION (LIST	\$45.37	\$45.37	4/1/2006
76140	CONSULTATION ON X-RAY EXAMINATION MADE ELSEWHERE, WRITTEN REPORT	\$27.30	\$27.30	5/1/2004
76150	XERORADIOGRAPHY	\$19.46	\$19.46	10/1/2007
76350	SUBTRACTION IN CONJUNCTION WITH CONTRAST STUDIES	\$16.38	\$16.38	5/1/2004
76376	3D RENDERING WITH INTERPRETATION AND REPORTING OF COMPUTED TOMOGRAPHY, MAGNETIC	\$125.71	\$125.71	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
76377	3D RENDERING WITH INTERPRETATION AND REPORTING OF COMPUTED TOMOGRAPHY, MAGNETIC	\$163.80	\$163.80	10/1/2007
76380	COMPUTED TOMOGRAPHY, LIMITED OR LOCALIZED FOLLOW-UP STUDY	\$198.06	\$198.06	10/1/2007
76390	MAGNETIC RESONANCE SPECTROSCOPY	\$501.21	\$501.21	10/1/2007
76496	UNLISTED FLUOROSCOPIC PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL)	BR	BR	1/1/2003
76497	UNLISTED COMPUTED TOMOGRAPHY PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL)	BR	BR	1/1/2003
76498	UNLISTED MAGNETIC RESONANCE PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL)	BR	BR	1/1/2003
76499	UNLISTED DIAGNOSTIC RADIOGRAPHIC PROCEDURE	BR	BR	10/1/1982
76506	ECHOENCEPHALOGRAPHY, REAL TIME WITH IMAGE DOCUMENTATION (GRAY SCALE) (FOR DETERM	\$102.46	\$102.46	10/1/2007
76510	OPHTHALMIC ULTRASOUND, DIAGNOSTIC; B-SCAN AND QUANTITATIVE A-SCAN PERFORMED	\$164.61	\$164.61	10/1/2007
76511	OPHTHALMIC ULTRASOUND, DIAGNOSTIC; QUANTITATIVE A-SCAN ONLY	\$121.42	\$121.42	10/1/2007
76512	OPHTHALMIC ULTRASOUND, DIAGNOSTIC; B-SCAN (WITH OR WITHOUT SUPERIMPOSED	\$114.48	\$114.48	10/1/2007
76513	OPHTHALMIC ULTRASOUND, DIAGNOSTIC; ANTERIOR SEGMENT ULTRASOUND, IMMERSION	\$96.09	\$96.09	10/1/2007
76514	OPHTHALMIC ULTRASOUND, DIAGNOSTIC; CORNEAL PACHYMETRY, UNILATERAL OR BILATERAL	\$12.62	\$12.62	10/1/2007
76516	OPHTHALMIC BIOMETRY BY ULTRASOUND ECHOGRAPHY, A-SCAN;	\$76.25	\$76.25	10/1/2007
76519	OPHTHALMIC BIOMETRY BY ULTRASOUND ECHOGRAPHY, A-SCAN; WITH INTRAOCULAR LENS	\$80.13	\$80.13	10/1/2007
76529	OPHTHALMIC ULTRASONIC FOREIGN BODY LOCALIZATION	\$75.41	\$75.41	10/1/2007
76536	ULTRASOUND, SOFT TISSUES OF HEAD AND NECK (EG, THYROID, PARATHYROID, PAROTID), R	\$94.86	\$94.86	10/1/2007
76604	ULTRASOUND, CHEST (INCLUDES MEDIASTINUM), REAL TIME WITH IMAGE DOCUMENTATION	\$82.84	\$82.84	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
76645	ULTRASOUND, BREAST(S) (UNILATERAL OR BILATERAL), REAL TIME WITH IMAGE DOCUMENTAT	\$77.03	\$77.03	10/1/2007
76700	ULTRASOUND, ABDOMINAL, REAL TIME WITH IMAGE DOCUMENTATION; COMPLETE	\$127.45	\$127.45	10/1/2007
76705	ULTRASOUND, ABDOMINAL, B-SCAN AND/OR REAL TIME WITH IMAGE DOCUMENTATION;	\$94.00	\$94.00	10/1/2007
76770	ULTRASOUND, RETROPERITONEAL (EG, RENAL, AORTA, NODES), REAL TIME WITH IMAGE DOCU	\$123.42	\$123.42	10/1/2007
76775	ULTRASOUND, RETROPERITONEAL (EG, RENAL, AORTA, NODES), B-SCAN AND/OR REAL TIME	\$93.65	\$93.65	10/1/2007
76776	ULTRASOUND, TRANSPLANTED KIDNEY, REAL TIME AND DUPLEX DOPPLER WITH IMAGE DOCUMEN	\$127.61	\$127.61	10/1/2007
76800	ULTRASOUND, SPINAL CANAL AND CONTENTS	\$118.46	\$118.46	10/1/2007
76801	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND MATER	\$135.74	\$135.74	10/1/2007
76802	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	\$83.90	\$83.90	10/1/2007
76805	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	\$140.79	\$140.79	10/1/2007
76810	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	\$101.05	\$101.05	10/1/2007
76811	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	\$240.78	\$240.78	10/1/2007
76812	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	\$170.08	\$170.08	10/1/2007
76813	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FIRST TRIMESTER	\$129.28	\$129.28	10/1/2007
76814	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FIRST TRIMESTER	\$85.71	\$85.71	10/1/2007
76815	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, LIMITED (EG,	\$92.22	\$92.22	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
76816	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FOLLOW-UP (EG,	\$98.45	\$98.45	10/1/2007
76817	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, TRANSVAGINAL	\$100.74	\$100.74	10/1/2007
76818	FETAL BIOPHYSICAL PROFILE; WITH NON-STRESS TESTING	\$122.29	\$122.29	10/1/2007
76819	FETAL BIOPHYSICAL PROFILE; WITHOUT NON-STRESS TESTING	\$102.70	\$102.70	10/1/2007
76820	DOPPLER VELOCIMETRY, FETAL; UMBILICAL ARTERY	\$81.60	\$81.60	10/1/2007
76821	DOPPLER VELOCIMETRY, FETAL; MIDDLE CEREBRAL ARTERY	\$103.39	\$103.39	10/1/2007
76825	ECHOCARDIOGRAPHY, FETAL, CARDIOVASCULAR SYSTEM, REAL TIME WITH IMAGE	\$182.60	\$182.60	10/1/2007
76826	ECHOCARDIOGRAPHY, FETAL, CARDIOVASCULAR SYSTEM, REAL TIME WITH IMAGE	\$87.99	\$87.99	10/1/2007
76827	DOPPLER ECHOCARDIOGRAPHY, FETAL, PULSED WAVE AND/OR CONTINUOUS WAVE WITH	\$92.55	\$92.55	10/1/2007
76828	DOPPLER ECHOCARDIOGRAPHY, FETAL, PULSED WAVE AND/OR CONTINUOUS WAVE WITH	\$69.25	\$69.25	10/1/2007
76830	ULTRASOUND, TRANSVAGINAL	\$106.10	\$106.10	10/1/2007
76831	SALINE INFUSION SONOHYSTEROGRAPHY (SIS), INCLUDING COLOR FLOW DOPPLER, WHEN	\$108.32	\$108.32	10/1/2007
76856	ULTRASOUND, PELVIC (NONOBSTETRIC), REAL TIME WITH IMAGE DOCUMENTATION; COMPLETE	\$106.88	\$106.88	10/1/2007
76857	ULTRASOUND, PELVIC (NONOBSTETRIC), B-SCAN AND/OR REAL TIME WITH IMAGE	\$93.93	\$93.93	10/1/2007
76870	ULTRASOUND, SCROTUM AND CONTENTS	\$104.34	\$104.34	10/1/2007
76872	ULTRASOUND, TRANSRECTAL;	\$127.87	\$127.87	10/1/2007
76873	ULTRASOUND, TRANSRECTAL; PROSTATE VOLUME STUDY FOR BRACHYTHERAPY TREATMENT	\$173.88	\$173.88	10/1/2007
76880	ULTRASOUND, EXTREMITY, NONVASCULAR, REAL TIME WITH IMAGE DOCUMENTATION	\$101.77	\$101.77	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
76885	ULTRASOUND, INFANT HIPS, REAL TIME WITH IMAGING DOCUMENTATION; DYNAMIC	\$112.13	\$112.13	10/1/2007
76886	ULTRASOUND, INFANT HIPS, REAL TIME WITH IMAGING DOCUMENTATION; LIMITED, STATIC	\$94.66	\$94.66	10/1/2007
76930	ULTRASONIC GUIDANCE FOR PERICARDIOCENTESIS, IMAGING SUPERVISION AND INTERPRETATI	\$100.33	\$100.33	10/1/2007
76932	ULTRASONIC GUIDANCE FOR ENDOMYOCARDIAL BIOPSY, IMAGING SUPERVISION AND	\$96.79	\$96.79	4/1/2006
76936	ULTRASOUND GUIDED COMPRESSION REPAIR OF ARTERIAL PSEUDOANEURYSM OR	\$348.30	\$348.30	10/1/2007
76937	ULTRASOUND GUIDANCE FOR VASCULAR ACCESS REQUIRING ULTRASOUND EVALUATION OF	\$35.69	\$35.69	10/1/2007
76940	ULTRASOUND GUIDANCE FOR, AND MONITORING OF, PARENCHYMAL TISSUE ABLATION	\$181.68	\$181.68	4/1/2006
76941	ULTRASONIC GUIDANCE FOR INTRAUTERINE FETAL TRANSFUSION OR CORDOCENTESIS,	\$132.05	\$132.05	4/1/2006
76942	ULTRASONIC GUIDANCE FOR NEEDLE PLACEMENT (EG, BIOPSY, ASPIRATION, INJECTION,	\$162.10	\$162.10	10/1/2007
76945	ULTRASONIC GUIDANCE FOR CHORIONIC VILLUS SAMPLING, IMAGING SUPERVISION AND	\$95.64	\$95.64	4/1/2006
76946	ULTRASONIC GUIDANCE FOR AMNIOCENTESIS, IMAGING SUPERVISION AND INTERPRETATION	\$70.72	\$70.72	10/1/2007
76950	ULTRASONIC GUIDANCE FOR PLACEMENT OF RADIATION THERAPY FIELDS	\$80.03	\$80.03	10/1/2007
76965	ULTRASONIC GUIDANCE FOR INTERSTITIAL RADIOELEMENT APPLICATION	\$248.72	\$248.72	10/1/2007
76970	ULTRASOUND STUDY FOLLOW-UP (SPECIFY)	\$72.11	\$72.11	10/1/2007
76975	GASTROINTESTINAL ENDOSCOPIC ULTRASOUND, SUPERVISION AND INTERPRETATION	\$104.04	\$104.04	4/1/2006
76977	ULTRASOUND BONE DENSITY MEASUREMENT AND INTERPRETATION, PERIPHERAL SITE(S), ANY	\$29.86	\$29.86	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
76998	ULTRASONIC GUIDANCE, INTRAOPERATIVE	\$170.33	\$170.33	1/1/2007
76999	UNLISTED ULTRASOUND PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL)	BR	BR	10/1/1982
77001	FLUOROSCOPIC GUIDANCE FOR CENTRAL VENOUS ACCESS DEVICE PLACEMENT, REPLACEMENT (C	\$85.06	\$85.06	10/1/2007
77002	FLUOROSCOPIC GUIDANCE FOR NEEDLE PLACEMENT (EG, BIOPSY, ASPIRATION, INJECTION, L	\$77.05	\$77.05	10/1/2007
77003	FLUOROSCOPIC GUIDANCE AND LOCALIZATION OF NEEDLE OR CATHETER TIP FOR SPINE OR PA	\$74.91	\$74.91	10/1/2007
77011	COMPUTED TOMOGRAPHY GUIDANCE FOR STEREOTACTIC LOCALIZATION	\$503.82	\$503.82	10/1/2007
77012	COMPUTED TOMOGRAPHY GUIDANCE FOR NEEDLE PLACEMENT (EG, BIOPSY, ASPIRATION, INJEC	\$332.73	\$332.73	10/1/2007
77013	COMPUTERIZED TOMOGRAPHY GUIDANCE FOR, AND MONITORING OF, PARENCHYMAL TISSUE ABLA	\$577.80	\$577.80	1/1/2007
77014	COMPUTED TOMOGRAPHY GUIDANCE FOR PLACEMENT OF RADIATION THERAPY FIELDS	\$175.19	\$175.19	10/1/2007
77021	MAGNETIC RESONANCE GUIDANCE FOR NEEDLE PLACEMENT (EG, FOR BIOPSY, NEEDLE ASPIRAT	\$509.34	\$509.34	10/1/2007
77022	MAGNETIC RESONANCE GUIDANCE FOR, AND MONITORING OF, PARENCHYMAL TISSUE ABLATION	\$708.08	\$708.08	1/1/2007
77031	STEREOTACTIC LOCALIZATION GUIDANCE FOR BREAST BIOPSY OR NEEDLE PLACEMENT (EG, FO	\$315.19	\$315.19	10/1/2007
77032	MAMMOGRAPHIC GUIDANCE FOR NEEDLE PLACEMENT, BREAST (EG, FOR WIRE LOCALIZATION OR	\$72.31	\$72.31	10/1/2007
77051	COMPUTER-AIDED DETECTION (COMPUTER ALGORITHM ANALYSIS OF DIGITAL IMAGE DATA FOR	\$17.69	\$17.69	10/1/2007
77052	COMPUTER-AIDED DETECTION (COMPUTER ALGORITHM ANALYSIS OF DIGITAL IMAGE DATA FOR	\$17.69	\$17.69	10/1/2007
77053	MAMMARY DUCTOGRAM OR GALACTOGRAM, SINGLE DUCT, RADIOLOGICAL SUPERVISION AND INTE	\$105.06	\$105.06	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
77054	MAMMARY DUCTOGRAM OR GALACTOGRAM, MULTIPLE DUCTS, RADIOLOGICAL SUPERVISION AND I	\$150.67	\$150.67	10/1/2007
77055	MAMMOGRAPHY; UNILATERAL	\$80.34	\$80.34	10/1/2007
77056	MAMMOGRAPHY; BILATERAL	\$100.34	\$100.34	10/1/2007
77057	SCREENING MAMMOGRAPHY, BILATERAL (2-VIEW FILM STUDY OF EACH BREAST)	\$84.25	\$84.25	10/1/2007
77058	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND/OR WITH CONTRAST MATERIAL(S); UN	\$826.57	\$826.57	10/1/2007
77059	MAGNETIC RESONANCE IMAGING, BREAST, WITHOUT AND/OR WITH CONTRAST MATERIAL(S); BI	\$1,022.26	\$1,022.26	10/1/2007
77071	MANUAL APPLICATION OF STRESS PERFORMED BY PHYSICIAN FOR JOINT RADIOGRAPHY, INCLU	\$29.69	\$29.69	10/1/2007
77072	BONE AGE STUDIES	\$23.06	\$23.06	10/1/2007
77073	BONE LENGTH STUDIES (ORTHOENTGENOGRAM, SCANOGRAM)	\$43.41	\$43.41	10/1/2007
77074	RADIOLOGIC EXAMINATION, OSSEOUS SURVEY; LIMITED (EG, FOR METASTASES)	\$65.71	\$65.71	10/1/2007
77075	RADIOLOGIC EXAMINATION, OSSEOUS SURVEY; COMPLETE (AXIAL AND APPENDICULAR SKELETO	\$91.44	\$91.44	10/1/2007
77076	RADIOLOGIC EXAMINATION, OSSEOUS SURVEY, INFANT	\$74.49	\$74.49	10/1/2007
77077	JOINT SURVEY, SINGLE VIEW, 2 OR MORE JOINTS (SPECIFY)	\$55.74	\$55.74	10/1/2007
77078	COMPUTED TOMOGRAPHY, BONE MINERAL DENSITY STUDY, 1 OR MORE SITES; AXIAL SKELETON	\$148.21	\$148.21	10/1/2007
77079	COMPUTED TOMOGRAPHY, BONE MINERAL DENSITY STUDY, 1 OR MORE SITES; APPENDICULAR S	\$105.35	\$105.35	10/1/2007
77080	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DXA), BONE DENSITY STUDY, 1 OR MORE SITES; AXI	\$115.02	\$115.02	10/1/2007
77081	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DXA), BONE DENSITY STUDY, 1 OR MORE SITES; APP	\$41.27	\$41.27	10/1/2007
77082	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DXA), BONE DENSITY STUDY, 1 OR MORE SITES; VER	\$36.02	\$36.02	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
77083	RADIOGRAPHIC ABSORPTIOMETRY (EG, PHOTODENSITOMETRY, RADIOGRAMMETRY), 1 OR MORE S	\$37.07	\$37.07	10/1/2007
77084	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BONE MARROW BLOOD SUPPLY	\$558.73	\$558.73	10/1/2007
77261	THERAPEUTIC RADIOLOGY TREATMENT PLANNING; SIMPLE	\$71.53	\$71.53	10/1/2007
77262	THERAPEUTIC RADIOLOGY TREATMENT PLANNING; INTERMEDIATE	\$107.41	\$107.41	10/1/2007
77263	THERAPEUTIC RADIOLOGY TREATMENT PLANNING; COMPLEX	\$159.64	\$159.64	10/1/2007
77280	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING; SIMPLE	\$184.72	\$184.72	10/1/2007
77285	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING; INTERMEDIATE	\$301.79	\$301.79	10/1/2007
77290	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING; COMPLEX	\$407.67	\$407.67	10/1/2007
77295	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING; THREE-DIMENSIONAL	\$1,159.54	\$1,159.54	10/1/2007
77299	UNLISTED PROCEDURE, THERAPEUTIC RADIOLOGY CLINICAL TREATMENT PLANNING	BR	BR	10/1/1982
77300	BASIC RADIATION DOSIMETRY CALCULATION, CENTRAL AXIS DEPTH DOSE CALCULATION, TDF,	\$82.21	\$82.21	10/1/2007
77301	INTENSITY MODULATED RADIOTHERAPY PLAN, INCLUDING DOSE-VOLUME HISTOGRAMS FOR	\$1,804.77	\$1,804.77	10/1/2007
77305	TELEETHERAPY, ISODOSE PLAN (WHETHER HAND OR COMPUTER CALCULATED); SIMPLE (ONE OR	\$100.28	\$100.28	10/1/2007
77310	TELEETHERAPY, ISODOSE PLAN (WHETHER HAND OR COMPUTER CALCULATED); INTERMEDIATE	\$134.40	\$134.40	10/1/2007
77315	TELEETHERAPY, ISODOSE PLAN (WHETHER HAND OR COMPUTER CALCULATED); COMPLEX	\$176.49	\$176.49	10/1/2007
77321	SPECIAL TELEETHERAPY PORT PLAN, PARTICLES, HEMIBODY, TOTAL BODY	\$185.44	\$185.44	10/1/2007
77326	BRACHYTHERAPY ISODOSE PLAN; SIMPLE (CALCULATION MADE FROM SINGLE PLANE, ONE TO	\$146.88	\$146.88	10/1/2007
77327	BRACHYTHERAPY ISODOSE PLAN; INTERMEDIATE (MULTIPLANE DOSAGE CALCULATIONS,	\$213.31	\$213.31	10/1/2007



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77328	BRACHYTHERAPY ISODOSE PLAN; COMPLEX (MULTIPLANE ISODOSE PLAN, VOLUME IMPLANT	\$303.41	\$303.41	10/1/2007
77331	SPECIAL DOSIMETRY (EG, TLD, MICRODOSIMETRY) (SPECIFY), ONLY WHEN PRESCRIBED BY	\$63.72	\$63.72	10/1/2007
77332	TREATMENT DEVICES, DESIGN AND CONSTRUCTION; SIMPLE (SIMPLE BLOCK, SIMPLE BOLUS)	\$82.51	\$82.51	10/1/2007
77333	TREATMENT DEVICES, DESIGN AND CONSTRUCTION; INTERMEDIATE (MULTIPLE BLOCKS,	\$103.65	\$103.65	10/1/2007
77334	TREATMENT DEVICES, DESIGN AND CONSTRUCTION; COMPLEX (IRREGULAR BLOCKS, SPECIAL	\$186.24	\$186.24	10/1/2007
77336	CONTINUING MEDICAL PHYSICS CONSULTATION, INCLUDING ASSESSMENT OF TREATMENT	\$104.45	\$104.45	10/1/2007
77370	SPECIAL MEDICAL RADIATION PHYSICS CONSULTATION	\$138.67	\$138.67	10/1/2007
77371	RADIATION TREATMENT DELIVERY, STEREOTACTIC RADIOSURGERY (SRS), COMPLETE COURSE O	\$1,180.19	\$1,180.19	10/1/2007
77372	RADIATION TREATMENT DELIVERY, STEREOTACTIC RADIOSURGERY (SRS), COMPLETE COURSE O	\$895.90	\$895.90	10/1/2007
77373	STEREOTACTIC BODY RADIATION THERAPY, TREATMENT DELIVERY, PER FRACTION TO 1 OR MO	\$1,670.32	\$1,670.32	10/1/2007
77399	UNLISTED PROCEDURE, MEDICAL RADIATION PHYSICS, DOSIMETRY AND TREATMENT DEVICES,	BR	BR	10/1/1982
77401	RADIATION TREATMENT DELIVERY, SUPERFICIAL AND/OR ORTHO VOLTAGE	\$60.84	\$60.84	10/1/2007
77402	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA, SINGLE PORT OR PARALLEL	\$96.57	\$96.57	10/1/2007
77403	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA, SINGLE PORT OR PARALLEL	\$92.68	\$92.68	10/1/2007
77404	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA, SINGLE PORT OR PARALLEL	\$96.96	\$96.96	10/1/2007
77407	RADIATION TREATMENT DELIVERY, TWO SEPARATE TREATMENT AREAS, THREE OR MORE PORTS	\$118.73	\$118.73	10/1/2007



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77408	RADIATION TREATMENT DELIVERY, TWO SEPARATE TREATMENT AREAS, THREE OR MORE PORTS	\$116.40	\$116.40	10/1/2007
77409	RADIATION TREATMENT DELIVERY, TWO SEPARATE TREATMENT AREAS, THREE OR MORE PORTS	\$122.22	\$122.22	10/1/2007
77411	RADIATION TREATMENT DELIVERY, TWO SEPARATE TREATMENT AREAS, THREE OR MORE PORTS	\$121.83	\$121.83	10/1/2007
77412	RADIATION TREATMENT DELIVERY, THREE OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLO	\$139.72	\$139.72	10/1/2007
77413	RADIATION TREATMENT DELIVERY, THREE OR MORE SEPARATE TREATMENT AREAS, CUSTOM	\$139.72	\$139.72	10/1/2007
77414	RADIATION TREATMENT DELIVERY, THREE OR MORE SEPARATE TREATMENT AREAS, CUSTOM	\$148.27	\$148.27	10/1/2007
77416	RADIATION TREATMENT DELIVERY, THREE OR MORE SEPARATE TREATMENT AREAS, CUSTOM	\$148.27	\$148.27	10/1/2007
77417	THERAPEUTIC RADIOLOGY PORT FILM(S)	\$22.23	\$22.23	10/1/2007
77418	INTENSITY MODULATED TREATMENT DELIVERY, SINGLE OR MULTIPLE FIELDS/ARCS, VIA	\$657.82	\$657.82	10/1/2007
77421	STEREOSCOPIC X-RAY GUIDANCE FOR LOCALIZATION OF TARGET VOLUME FOR THE DELIVERY O	\$139.42	\$139.42	10/1/2007
77422	HIGH ENERGY NEUTRON RADIATION TREATMENT DELIVERY; SINGLE TREATMENT AREA USING A	\$106.71	\$106.71	10/1/2007
77423	HIGH ENERGY NEUTRON RADIATION TREATMENT DELIVERY; 1 OR MORE ISOCENTER(S) WITH CO	\$143.99	\$143.99	10/1/2007
77427	RADIATION TREATMENT MANAGEMENT, FIVE TREATMENTS	\$181.68	\$181.68	10/1/2007
77431	RADIATION THERAPY MANAGEMENT WITH COMPLETE COURSE OF THERAPY CONSISTING OF ONE	\$94.88	\$94.88	10/1/2007
77432	STEREOTACTIC RADIATION TREATMENT MANAGEMENT OF CEREBRAL LESION(S) (COMPLETE	\$405.86	\$405.86	10/1/2007
77435	STEREOTACTIC BODY RADIATION THERAPY, TREATMENT MANAGEMENT, PER TREATMENT COURSE,	\$664.20	\$664.20	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
77470	SPECIAL TREATMENT PROCEDURE (EG, TOTAL BODY IRRADIATION, HEMIBODY RADIATION,	\$465.35	\$465.35	10/1/2007
77499	UNLISTED PROCEDURE, THERAPEUTIC RADIOLOGY TREATMENT MANAGEMENT	BR	BR	10/1/1982
77520	PROTON TREATMENT DELIVERY; SIMPLE, WITHOUT COMPENSATION	BR	BR	1/1/2000
77522	PROTON TREATMENT DELIVERY; SIMPLE, WITH COMPENSATION	BR	BR	1/1/2001
77523	PROTON TREATMENT DELIVERY; INTERMEDIATE	BR	BR	1/1/2000
77525	PROTON TREATMENT DELIVERY; COMPLEX	BR	BR	1/1/2001
77600	HYPERTHERMIA, EXTERNALLY GENERATED; SUPERFICIAL (IE, HEATING TO A DEPTH OF 4 CM	\$262.37	\$262.37	10/1/2007
77605	HYPERTHERMIA, EXTERNALLY GENERATED; DEEP (IE, HEATING TO DEPTHS GREATER THAN 4	\$394.72	\$394.72	10/1/2007
77610	HYPERTHERMIA GENERATED BY INTERSTITIAL PROBE(S); 5 OR FEWER INTERSTITIAL	\$333.83	\$333.83	10/1/2007
77615	HYPERTHERMIA GENERATED BY INTERSTITIAL PROBE(S); MORE THAN 5 INTERSTITIAL	\$476.17	\$476.17	10/1/2007
77620	HYPERTHERMIA GENERATED BY INTRACAVITARY PROBE(S)	\$265.75	\$265.75	10/1/2007
77750	INFUSION OR INSTILLATION OF RADIOELEMENT SOLUTION (INCLUDES THREE MONTHS FOLLOW-	\$316.08	\$316.08	10/1/2007
77761	INTRACAVITARY RADIATION SOURCE APPLICATION; SIMPLE	\$313.64	\$313.64	10/1/2007
77762	INTRACAVITARY RADIATION SOURCE APPLICATION; INTERMEDIATE	\$454.51	\$454.51	10/1/2007
77763	INTRACAVITARY RADIATION SOURCE APPLICATION; COMPLEX	\$641.21	\$641.21	10/1/2007
77776	INTERSTITIAL RADIATION SOURCE APPLICATION; SIMPLE	\$351.82	\$351.82	10/1/2007
77777	INTERSTITIAL RADIATION SOURCE APPLICATION; INTERMEDIATE	\$557.04	\$557.04	10/1/2007
77778	INTERSTITIAL RADIATION SOURCE APPLICATION; COMPLEX	\$793.47	\$793.47	10/1/2007
77781	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY; 1-4 SOURCE POSITIONS OR	\$739.14	\$739.14	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
77782	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY; 5-8 SOURCE POSITIONS OR	\$856.19	\$856.19	10/1/2007
77783	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY; 9-12 SOURCE POSITIONS OR	\$1,028.49	\$1,028.49	10/1/2007
77784	REMOTE AFTERLOADING HIGH INTENSITY BRACHYTHERAPY; OVER 12 SOURCE POSITIONS OR	\$1,325.48	\$1,325.48	10/1/2007
77789	SURFACE APPLICATION OF RADIATION SOURCE	\$87.62	\$87.62	10/1/2007
77790	SUPERVISION, HANDLING, LOADING OF RADIATION SOURCE	\$78.61	\$78.61	10/1/2007
77799	UNLISTED PROCEDURE, CLINICAL BRACHYTHERAPY	BR	BR	10/1/1982
78000	THYROID UPTAKE; SINGLE DETERMINATION	\$56.55	\$56.55	10/1/2007
78001	THYROID UPTAKE; MULTIPLE DETERMINATIONS	\$74.18	\$74.18	10/1/2007
78003	THYROID UPTAKE; STIMULATION, SUPPRESSION OR DISCHARGE (NOT INCLUDING INITIAL	\$63.41	\$63.41	10/1/2007
78006	THYROID IMAGING, WITH UPTAKE; SINGLE DETERMINATION	\$154.66	\$154.66	10/1/2007
78007	THYROID IMAGING, WITH UPTAKE; MULTIPLE DETERMINATIONS	\$131.34	\$131.34	10/1/2007
78010	THYROID IMAGING; ONLY	\$114.20	\$114.20	10/1/2007
78011	THYROID IMAGING; WITH VASCULAR FLOW	\$138.10	\$138.10	10/1/2007
78015	THYROID CARCINOMA METASTASES IMAGING; LIMITED AREA (EG, NECK AND CHEST ONLY)	\$161.80	\$161.80	10/1/2007
78016	THYROID CARCINOMA METASTASES IMAGING; WITH ADDITIONAL STUDIES (EG, URINARY	\$225.81	\$225.81	10/1/2007
78018	THYROID CARCINOMA METASTASES IMAGING; WHOLE BODY	\$283.03	\$283.03	10/1/2007
78020	THYROID CARCINOMA METASTASES UPTAKE (LIST SEPARATELY IN ADDITION TO CODE FOR	\$88.25	\$88.25	10/1/2007
78070	PARATHYROID IMAGING	\$198.49	\$198.49	10/1/2007
78075	ADRENAL IMAGING, CORTEX AND/OR MEDULLA	\$311.80	\$311.80	10/1/2007
78099	UNLISTED ENDOCRINE PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE	BR	BR	10/1/1982
78102	BONE MARROW IMAGING; LIMITED AREA	\$128.00	\$128.00	10/1/2007



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78103	BONE MARROW IMAGING; MULTIPLE AREAS	\$184.10	\$184.10	10/1/2007
78104	BONE MARROW IMAGING; WHOLE BODY	\$222.87	\$222.87	10/1/2007
78110	PLASMA VOLUME, RADIOPHARMACEUTICAL VOLUME-DILUTION TECHNIQUE (SEPARATE	\$59.27	\$59.27	10/1/2007
78111	PLASMA VOLUME, RADIOPHARMACEUTICAL VOLUME-DILUTION TECHNIQUE (SEPARATE	\$110.99	\$110.99	10/1/2007
78120	RED CELL VOLUME DETERMINATION (SEPARATE PROCEDURE); SINGLE SAMPLING	\$84.87	\$84.87	10/1/2007
78121	RED CELL VOLUME DETERMINATION (SEPARATE PROCEDURE); MULTIPLE SAMPLINGS	\$125.77	\$125.77	10/1/2007
78122	WHOLE BLOOD VOLUME DETERMINATION, INCLUDING SEPARATE MEASUREMENT OF PLASMA	\$185.35	\$185.35	10/1/2007
78130	RED CELL SURVIVAL STUDY;	\$149.60	\$149.60	10/1/2007
78135	RED CELL SURVIVAL STUDY; DIFFERENTIAL ORGAN/TISSUE KINETICS, (EG, SPLENIC	\$260.81	\$260.81	10/1/2007
78140	LABELED RED CELL SEQUESTRATION, DIFFERENTIAL ORGAN/TISSUE, (EG, SPLENIC AND/OR	\$177.72	\$177.72	10/1/2007
78185	SPLEEN IMAGING ONLY, WITH OR WITHOUT VASCULAR FLOW	\$140.62	\$140.62	10/1/2007
78190	KINETICS, STUDY OF PLATELET SURVIVAL, WITH OR WITHOUT DIFFERENTIAL ORGAN/TISSUE	\$316.86	\$316.86	10/1/2007
78191	PLATELET SURVIVAL STUDY	\$288.77	\$288.77	10/1/2007
78195	LYMPHATICS AND LYMPH NODES IMAGING	\$263.40	\$263.40	10/1/2007
78199	UNLISTED HEMATOPOIETIC, RETICULOENDOTHELIAL AND LYMPHATIC PROCEDURE, DIAGNOSTIC	BR	BR	10/1/1982
78201	LIVER IMAGING; STATIC ONLY	\$138.14	\$138.14	10/1/2007
78202	LIVER IMAGING; WITH VASCULAR FLOW	\$162.37	\$162.37	10/1/2007
78205	LIVER IMAGING (SPECT);	\$266.13	\$266.13	10/1/2007
78206	LIVER IMAGING (SPECT); WITH VASCULAR FLOW	\$355.27	\$355.27	10/1/2007
78215	LIVER AND SPLEEN IMAGING; STATIC ONLY	\$158.18	\$158.18	10/1/2007
78216	LIVER AND SPLEEN IMAGING; WITH VASCULAR FLOW	\$160.69	\$160.69	10/1/2007



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78220	LIVER FUNCTION STUDY WITH HEPATOBILIARY AGENTS, WITH SERIAL IMAGES	\$166.83	\$166.83	10/1/2007
78223	HEPATOBILIARY DUCTAL SYSTEM IMAGING, INCLUDING GALLBLADDER, WITH OR WITHOUT	\$231.22	\$231.22	10/1/2007
78230	SALIVARY GLAND IMAGING;	\$127.62	\$127.62	10/1/2007
78231	SALIVARY GLAND IMAGING; WITH SERIAL IMAGES	\$149.20	\$149.20	10/1/2007
78232	SALIVARY GLAND FUNCTION STUDY	\$157.56	\$157.56	10/1/2007
78258	ESOPHAGEAL MOTILITY	\$178.25	\$178.25	10/1/2007
78261	GASTRIC MUCOSA IMAGING	\$216.28	\$216.28	10/1/2007
78262	GASTROESOPHAGEAL REFLUX STUDY	\$219.43	\$219.43	10/1/2007
78264	GASTRIC EMPTYING STUDY	\$231.10	\$231.10	10/1/2007
78267	UREA BREATH TEST, C-14 (ISOTOPIC); ACQUISITION FOR ANALYSIS	\$10.98	\$10.98	5/1/2004
78268	UREA BREATH TEST, C-14 (ISOTOPIC); ANALYSIS	\$94.11	\$94.11	5/1/2004
78270	VITAMIN B-12 ABSORPTION STUDY (EG, SCHILLING TEST); WITHOUT INTRINSIC FACTOR	\$76.41	\$76.41	10/1/2007
78271	VITAMIN B-12 ABSORPTION STUDY (EG, SCHILLING TEST); WITH INTRINSIC FACTOR	\$79.52	\$79.52	10/1/2007
78272	VITAMIN B-12 ABSORPTION STUDIES COMBINED, WITH AND WITHOUT INTRINSIC FACTOR	\$104.57	\$104.57	10/1/2007
78278	ACUTE GASTROINTESTINAL BLOOD LOSS IMAGING	\$276.63	\$276.63	10/1/2007
78282	GASTROINTESTINAL PROTEIN LOSS	\$19.65	\$19.65	4/1/2006
78290	INTESTINE IMAGING (EG, ECTOPIC GASTRIC MUCOSA, MECKEL'S LOCALIZATION, VOLVULUS)	\$204.53	\$204.53	10/1/2007
78291	PERITONEAL-VEIN SHUNT PATENCY TEST (EG, FOR LEVEEN, DENVER SHUNT)	\$193.72	\$193.72	10/1/2007
78299	UNLISTED GASTROINTESTINAL PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE	BR	BR	10/1/1982
78300	BONE AND/OR JOINT IMAGING; LIMITED AREA	\$145.29	\$145.29	10/1/2007
78305	BONE AND/OR JOINT IMAGING; MULTIPLE AREAS	\$203.29	\$203.29	10/1/2007
78306	BONE AND/OR JOINT IMAGING; WHOLE BODY	\$228.88	\$228.88	10/1/2007
78315	BONE AND/OR JOINT IMAGING; THREE PHASE STUDY	\$275.35	\$275.35	10/1/2007



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78320	BONE AND/OR JOINT IMAGING; TOMOGRAPHIC (SPECT)	\$282.02	\$282.02	10/1/2007
78350	BONE DENSITY (BONE MINERAL CONTENT) STUDY, ONE OR MORE SITES; SINGLE PHOTON	\$42.04	\$42.04	10/1/2007
78399	UNLISTED MUSCULOSKELETAL PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE	BR	BR	10/1/1982
78414	DETERMINATION OF CENTRAL C-V HEMODYNAMICS (NON-IMAGING) (EG, EJECTION FRACTION W	\$24.06	\$24.06	4/1/2006
78428	CARDIAC SHUNT DETECTION	\$159.05	\$159.05	10/1/2007
78445	NON-CARDIAC VASCULAR FLOW IMAGING (IE, ANGIOGRAPHY, VENOGRAPHY)	\$123.93	\$123.93	10/1/2007
78456	ACUTE VENOUS THROMBOSIS IMAGING, PEPTIDE	\$270.47	\$270.47	10/1/2007
78457	VENOUS THROMBOSIS IMAGING, VENOGRAM; UNILATERAL	\$162.99	\$162.99	10/1/2007
78458	VENOUS THROMBOSIS IMAGING, VENOGRAM; BILATERAL	\$210.07	\$210.07	10/1/2007
78459	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION	BR	BR	1/1/1996
78460	MYOCARDIAL PERFUSION IMAGING; (PLANAR) SINGLE STUDY, AT REST OR STRESS	\$157.61	\$157.61	10/1/2007
78461	MYOCARDIAL PERFUSION IMAGING; MULTIPLE STUDIES, (PLANAR) AT REST AND/OR STRESS	\$242.37	\$242.37	10/1/2007
78464	MYOCARDIAL PERFUSION IMAGING; TOMOGRAPHIC (SPECT), SINGLE STUDY (INCLUDING	\$328.19	\$328.19	10/1/2007
78465	MYOCARDIAL PERFUSION IMAGING; TOMOGRAPHIC (SPECT), MULTIPLE STUDIES (INCLUDING	\$548.01	\$548.01	10/1/2007
78466	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR; QUALITATIVE OR QUANTITATIVE	\$156.68	\$156.68	10/1/2007
78468	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR; WITH EJECTION FRACTION BY FIRST PASS	\$209.98	\$209.98	10/1/2007
78469	MYOCARDIAL IMAGING, INFARCT AVID, PLANAR; TOMOGRAPHIC SPECT WITH OR WITHOUT	\$266.45	\$266.45	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
78472	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM; PLANAR, SINGLE STUDY AT REST OR	\$276.39	\$276.39	10/1/2007
78473	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM; MULTIPLE STUDIES, WALL MOTION	\$399.96	\$399.96	10/1/2007
78478	MYOCARDIAL PERFUSION STUDY WITH WALL MOTION, QUALITATIVE OR QUANTITATIVE STUDY	\$82.31	\$82.31	10/1/2007
78480	MYOCARDIAL PERFUSION STUDY WITH EJECTION FRACTION (LIST SEPARATELY IN ADDITION	\$74.12	\$74.12	10/1/2007
78481	CARDIAC BLOOD POOL IMAGING, (PLANAR), FIRST PASS TECHNIQUE; SINGLE STUDY, AT	\$259.24	\$259.24	10/1/2007
78483	CARDIAC BLOOD POOL IMAGING, (PLANAR), FIRST PASS TECHNIQUE; MULTIPLE STUDIES,	\$382.05	\$382.05	10/1/2007
78491	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION; SINGLE STUDY	BR	BR	1/1/1998
78492	MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION; MULTIPLE	BR	BR	1/1/1998
78494	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM, SPECT, AT REST, WALL MOTION	\$334.67	\$334.67	10/1/2007
78496	CARDIAC BLOOD POOL IMAGING, GATED EQUILIBRIUM, SINGLE STUDY, AT REST, WITH	\$250.93	\$250.93	10/1/2007
78499	UNLISTED CARDIOVASCULAR PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE	BR	BR	10/1/1982
78580	PULMONARY PERFUSION IMAGING; PARTICULATE	\$188.82	\$188.82	10/1/2007
78584	PULMONARY PERFUSION IMAGING, PARTICULATE, WITH VENTILATION; SINGLE BREATH	\$173.14	\$173.14	10/1/2007
78585	PULMONARY PERFUSION IMAGING, PARTICULATE, WITH VENTILATION; REBREATHING AND	\$306.30	\$306.30	10/1/2007
78586	PULMONARY VENTILATION IMAGING, AEROSOL; SINGLE PROJECTION	\$137.92	\$137.92	10/1/2007
78587	PULMONARY VENTILATION IMAGING, AEROSOL; MULTIPLE PROJECTIONS (EG, ANTERIOR,	\$160.12	\$160.12	10/1/2007



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PROC	DESCRIPTION	NON FAC RATE 2007	FAC RATE 2007	EFF DATE
78588	PULMONARY PERFUSION IMAGING, PARTICULATE, WITH VENTILATION IMAGING, AEROSOL,	\$230.30	\$230.30	10/1/2007
78591	PULMONARY VENTILATION IMAGING, GASEOUS, SINGLE BREATH, SINGLE PROJECTION	\$145.30	\$145.30	10/1/2007
78593	PULMONARY VENTILATION IMAGING, GASEOUS, WITH REBREATHING AND WASHOUT WITH OR	\$174.58	\$174.58	10/1/2007
78594	PULMONARY VENTILATION IMAGING, GASEOUS, WITH REBREATHING AND WASHOUT WITH OR	\$228.57	\$228.57	10/1/2007
78596	PULMONARY QUANTITATIVE DIFFERENTIAL FUNCTION (VENTILATION/ PERFUSION) STUDY	\$360.95	\$360.95	10/1/2007
78599	UNLISTED RESPIRATORY PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE	BR	BR	10/1/1982
78600	BRAIN IMAGING, LIMITED PROCEDURE; STATIC	\$176.61	\$176.61	10/1/2007
78601	BRAIN IMAGING, LIMITED PROCEDURE; WITH VASCULAR FLOW	\$178.78	\$178.78	10/1/2007
78605	BRAIN IMAGING, COMPLETE STUDY; STATIC	\$174.43	\$174.43	10/1/2007
78606	BRAIN IMAGING, COMPLETE STUDY; WITH VASCULAR FLOW	\$229.65	\$229.65	10/1/2007
78607	BRAIN IMAGING, COMPLETE STUDY; TOMOGRAPHIC (SPECT)	\$402.60	\$402.60	10/1/2007
78608	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); METABOLIC EVALUATION	BR	BR	1/1/1994
78609	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); PERFUSION EVALUATION	BR	BR	1/1/1994
78610	BRAIN IMAGING, VASCULAR FLOW ONLY	\$105.17	\$105.17	10/1/2007
78615	CEREBRAL VASCULAR FLOW	\$189.66	\$189.66	10/1/2007
78630	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATERIAL);	\$268.48	\$268.48	10/1/2007
78635	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATERIAL);	\$187.25	\$187.25	10/1/2007
78645	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATERIAL);	\$211.18	\$211.18	10/1/2007



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78647	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATERIAL);	\$359.05	\$359.05	10/1/2007
78650	CEREBROSPINAL FLUID LEAKAGE DETECTION AND LOCALIZATION	\$253.13	\$253.13	10/1/2007
78660	RADIOPHARMACEUTICAL DACRYOCYSTOGRAPHY	\$130.80	\$130.80	10/1/2007
78699	UNLISTED NERVOUS SYSTEM PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE	BR	BR	10/1/1982
78700	KIDNEY IMAGING MORPHOLOGY;	\$157.98	\$157.98	10/1/2007
78701	KIDNEY IMAGING; WITH VASCULAR FLOW	\$183.12	\$183.12	10/1/2007
78707	KIDNEY IMAGING MORPHOLOGY; WITH VASCULAR FLOW AND FUNCTION, SINGLE STUDY WITHOUT	\$234.36	\$234.36	10/1/2007
78708	KIDNEY IMAGING MORPHOLOGY; WITH VASCULAR FLOW AND FUNCTION, SINGLE STUDY, WITH P	\$226.86	\$226.86	10/1/2007
78709	KIDNEY IMAGING MORPHOLOGY; WITH VASCULAR FLOW AND FUNCTION, MULTIPLE STUDIES, WI	\$286.34	\$286.34	10/1/2007
78710	KIDNEY IMAGING MORPHOLOGY; TOMOGRAPHIC (SPECT)	\$264.37	\$264.37	10/1/2007
78725	KIDNEY FUNCTION STUDY, NON-IMAGING RADIOISOTOPIC STUDY	\$96.37	\$96.37	10/1/2007
78730	URINARY BLADDER RESIDUAL STUDY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY	\$74.63	\$74.63	10/1/2007
78740	URETERAL REFLUX STUDY (RADIOPHARMACEUTICAL VOIDING CYSTOGRAM)	\$143.49	\$143.49	10/1/2007
78761	TESTICULAR IMAGING WITH VASCULAR FLOW	\$178.04	\$178.04	10/1/2007
78799	UNLISTED GENITOURINARY PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE	BR	BR	10/1/1982
78800	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR OR DISTRIBUTION OF RADIOPHARMACEUTICAL	\$177.10	\$177.10	10/1/2007
78801	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR OR DISTRIBUTION OF	\$225.67	\$225.67	10/1/2007
78802	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR OR DISTRIBUTION OF	\$288.49	\$288.49	10/1/2007
78803	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR OR DISTRIBUTION OF	\$393.80	\$393.80	10/1/2007
78804	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR OR DISTRIBUTION OF	\$520.74	\$520.74	10/1/2007



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78805	RADIOPHARMACEUTICAL LOCALIZATION OF INFLAMMATORY PROCESS; LIMITED AREA	\$179.15	\$179.15	10/1/2007
78806	RADIOPHARMACEUTICAL LOCALIZATION OF INFLAMMATORY PROCESS; WHOLE BODY	\$318.51	\$318.51	10/1/2007
78807	RADIOPHARMACEUTICAL LOCALIZATION OF INFLAMMATORY PROCESS; TOMOGRAPHIC (SPECT)	\$386.79	\$386.79	10/1/2007
78811	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); LIMITED AREA (EG, CHEST,	BR	BR	1/1/2005
78812	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); SKULL BASE TO MID-THIGH	BR	BR	1/1/2005
78813	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); WHOLE BODY	BR	BR	1/1/2005
78814	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	BR	BR	1/1/2005
78815	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	BR	BR	1/1/2005
78816	TUMOR IMAGING, POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED	BR	BR	1/1/2005
78890	GENERATION OF AUTOMATED DATA: INTERACTIVE PROCESS INVOLVING NUCLEAR PHYSICIAN	\$47.36	\$47.36	10/1/2007
78891	GENERATION OF AUTOMATED DATA: INTERACTIVE PROCESS INVOLVING NUCLEAR PHYSICIAN	\$95.49	\$95.49	10/1/2007
78999	UNLISTED MISCELLANEOUS PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE	BR	BR	10/1/1982
79005	RADIOPHARMACEUTICAL THERAPY, BY ORAL ADMINISTRATION	\$182.99	\$182.99	10/1/2007
79101	RADIOPHARMACEUTICAL THERAPY, BY INTRAVENOUS ADMINISTRATION	\$193.66	\$193.66	10/1/2007
79200	RADIOPHARMACEUTICAL THERAPY, BY INTRACAVITARY ADMINISTRATION	\$196.29	\$196.29	10/1/2007
79300	RADIOPHARMACEUTICAL THERAPY, BY INTERSTITIAL RADIOACTIVE COLLOID ADMINISTRATION	\$83.44	\$83.44	4/1/2006
79403	RADIOPHARMACEUTICAL THERAPY, RADIOLABELED MONOCLONAL ANTIBODY BY INTRAVENOUS	\$266.42	\$266.42	10/1/2007



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79440	RADIOPHARMACEUTICAL THERAPY, BY INTRA-ARTICULAR ADMINISTRATION	\$192.38	\$192.38	10/1/2007
79445	RADIOPHARMACEUTICAL THERAPY, BY INTRA-ARTERIAL PARTICULATE ADMINISTRATION	\$231.09	\$231.09	4/1/2006
79999	RADIOPHARMACEUTICAL THERAPY, UNLISTED PROCEDURE	BR	BR	10/1/1982
G0130	SINGLE ENERGY X-RAY ABSORPTIOMETRY (SEXA) BONE DENSITY STUDY, ONE OR MORE	\$40.88	\$40.88	10/1/2007
G0173	LINEAR ACCELERATOR BASED STEREOTACTIC RADIOSURGERY, COMPLETE COURSE OF THERAPY	BR	BR	1/1/2001
G0202	SCREENING MAMMOGRAPHY, PRODUCING DIRECT DIGITAL IMAGE, BILATERAL, ALL VIEWS	\$135.13	\$135.13	10/1/2007
G0204	DIAGNOSTIC MAMMOGRAPHY, PRODUCING DIRECT DIGITAL IMAGE, BILATERAL, ALL VIEWS	\$146.56	\$146.56	10/1/2007
G0206	DIAGNOSTIC MAMMOGRAPHY, PRODUCING DIRECT DIGITAL IMAGE, UNILATERAL, ALL VIEWS	\$118.01	\$118.01	10/1/2007
G0219	PET IMAGING WHOLE BODY; MELANOMA FOR NON-COVERED INDICATIONS	\$2,045.29	\$2,045.29	5/1/2004
G0251	LINEAR ACCELERATOR BASED STEREOTACTIC RADIOSURGERY, DELIVERY INCLUDING	BR	BR	1/1/2003
G0275	RENAL ARTERY ANGIOGRAPHY (UNILATERAL OR BILATERAL) PERFORMED AT THE TIME OF	\$13.47	\$13.47	10/1/2007
G0278	ILIAC ARTERY ANGIOGRAPHY PERFORMED AT THE SAME TIME OF CARDIAC CATHETERIZATION,	\$13.47	\$13.47	10/1/2007
G0339	IMAGE-GUIDED ROBOTIC LINEAR ACCELERATOR-BASED STEREOTACTIC RADIOSURGERY,	BR	BR	1/1/2004
G0340	IMAGE-GUIDED ROBOTIC LINEAR ACCELERATOR-BASED STEROTACTIC RADIOSURGERY,	BR	BR	1/1/2004
Q0092	SET-UP PORTABLE X-RAY EQUIPMENT	\$14.00	\$14.00	10/1/2007
R0070	TRANSPORTATION OF PORTABLE X-RAY EQUIPMENT AND PERSONNEL TO HOME OR NURSING HOME	\$103.08	\$103.08	5/1/2004
R0075	TRANSPORTATION OF PORTABLE X-RAY EQUIPMENT AND PERSONNEL TO HOME OR NURSING	BR	BR	3/1/1989



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R0076	TRANSPORTATION OF PORTABLE EKG TO FACILITY OR LOCATION, PER PATIENT	BR	BR	3/1/1989
S0625	RETINAL TELEScreensING BY DIGITAL IMAGING	\$74.60	\$74.60	7/1/2005